## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

6677-7 103RD ST.

JACKSONVILLE FL 32210-7133

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 30 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

JACKSONVILLE FL 32210

6677-7 103RD ST.

DOCUMENT # P94000037351 (1)

4 JAX ENTERPRISES, INC.

							3. [	Date Incorporated or Qualified		e of Last R	eport	
								05/18/1994	02/2	1/1996		
2. Principal Pl	ace of Business	2a. Mailir	2a. Mailing Address				4.	FEI Number		Ar	oplied For	
21		26	26				<b>59-3247729</b> Not Applicable					
Suite, Apt a	#, etc.	Suite,	Suite, Apt. #, etc.				5. 0	Certificate of Status Desired		\$8.75		
22		27								Fee Re	equired	
City & State	3	City 8	City & State				ı	Election Campaign Financing		\$5.00		
23		28					Trust Fund Contribution Added to Fees					
Zφ	Country	Zip		Count	iry		8. This corporation has liability for intangible tax under s. 199.032,					
24	25	29		30			Florida Statutes X Yes No					
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent						
SMITH, CHRISTOPHER A						81 Name						
7223 STATE ROAD 52, SUITE 1 HUDSON FL 34667					82 Street Addr			dress (P.O. Box Number is Not Acceptable)				
					13							
				-	04 (0)					05   7im	Codo	
				5	84 City				FL	<b>85</b> Zip (	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered.												
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.												
9-77												
SIGNATURE Signative is part to protect datase of register or agent and officit applicable) (NOTE: Registeric Agent signature required when reinstating) DATE												
12.	······································	AND DIRECTORS		13.				DDITIONS/CHANGES TO OFFIC		DIRECTOR	IS IN 12	
THE	DPS		DELETE	1.1 T(T),I	E					Change	Addition	
NAVE	GERMAIN, GERALD V				1.2 NAME							
STREET ADDRESS	AART B JAARD AT				1.3 STREET ADDRESS							
	JACKSONVILLE FL 32210				1.4 CITY - ST - ZIP							
CITY - ST - ZiP	DVT		DELETE	2 1 TITLE		- 114				Change	Addition	
1111.E	=		L_j Dittin.	2 2 NAM		Ì				01101190		
NAME	SMITH, CHRISTOPHER A										ł	
STREET ADDRESS	6677-7 103RD ST.					23 STREET ADDRESS						
CiTY+ST+ZiP	JACKSONVILLE FL 32210		DELFTE	2 4 C/TY		T-ZIP				Change	Addition	
1.11.6			TTI DETELE	3 1 TITLE						Whattye	L) Addition	
NAME				3 2 NAM	}					}		
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TITLE			L DELETE	4.1 TITUS						Change	Addition	
NAME				4. 2 NAM	λE						ļ	
STREET ADORESS				4.3 STRE	EET A	ADDRESS						
CITY - ST- ZIP				4.4 CITY	-\$1	- ZIP				<del></del>		
TITLE			DELETE	5.1 TITLE	E					☐ Change	Addition	
NAME				5 2 NAM	ΙE							
STREET ADDRESS				5.3 STRE	EET A	ADDRESS						
CITY - ST - ZiP				5.4 CITY	<u>-</u> \$T	- ZiP						
TIFLE			DELETE	6.1 TITLE	£					Change	Addition	
NAME				6.2 NAM	1E	į						
STREET ADDRESS				6.3 STRE	EET A	ADDRESS						
City-St-Zip	6.4				6.4 CITY-ST-ZIP							
14. I do heret	by certify that the information supp			ify for the e	xer	nption stated						
information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.												

01/10/1997

904-276-8003