FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000037386 (7)

1. Corporation Name
JA VENTURES, INC.

Principal Place of Business	Mailing Address
~~877 EXECUTIVE CENTER DR W~~ 6219 Palma D ~~SUITE 303~~ ~~ST PETERSBURG FL 33702~~	~~877 EXECUTIVE CENTER DR W~~ ~~SUITE 303~~ ~~ST PETERSBURG FL 33702~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/18/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21: 6219 Palma Del Mar Blvd.	26: 6219 Palma Del Mar Blvd.
Suite, Apt. #, etc. 22: #111D	Suite, Apt. #, etc. 27: #111D
City & State 23: St. Petersburg, FL	City & State 28: St. Petersburg, FL
Zip 24: 33715 Country 25: US	Zip 29: 33715 Country 30: US

4. FEI Number: 59-3243593 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

~~MASCARA, ERNEST L~~
~~877 EXECUTIVE CENTER DR W~~
~~SUITE 303~~
~~ST PETERSBURG FL 33702~~

10. Name and Address of New Registered Agent

81 Name: JAMES R. WOLDSETH
82 Street Address (P.O. Box Number is Not Acceptable): 11590 Seminole Blvd.
83:
84 City: Largo FL 85 Zip Code: 34648

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: James R. Woldseth JAMES R. WOLDSETH DATE
Signature of new registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	~~D~~ ~~MASCARA, ERNEST L~~ ~~877 EXECUTIVE CENTER DR W~~ ~~ST PETERSBURG FL 33702~~	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP	☒ Change ☐ Addition D/P/S/T John Cerbonne 6219 Palma del Mar Boulevard, #111D St. Petersburg, FL 33715
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP	☐ Change ☒ Addition ANN CERBONE Vice President, Director 6219 PALMA DEL MAR BLVD., #111D ST. PETERSBURG, FL 33715
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP	☐ Change ☒ Addition JONNA DE VITO Director 6219 PALMA DEL MAR BLVD., #111D ST. PETERSBURG, FL 33715
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP	☐ Change ☐ Addition Deposited by Bank

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 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 or 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.

SIGNATURE: John Cerbonne JOHN CERBONE 4-26-95 (813)593-1609
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number

RW

0310378 CP