FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996 2-14-96 B- 1132 MC

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

DOCUMENT # P94000040940 (6)

1. Corporation Name

J.J.A.P.B., INC.

Principal Place of Business
13857 WELLINGTON TRACE
SUITE D-1
WEST PALM BEACH FL 33414

Mailing Address
13857 WELLINGTON TRACE
SUITE D-1
WEST PALM BEACH FL 33414

3. Date Incorporated or Qualified: 05/26/1994
3a. Date of Last Report: 03/27/1995
4. FEI Number: 65-0560016 — 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

2. Principal Place of Business
21 12769 WEST FOREST HILL
Suite, Apt. #, etc.
22 SUITE E
City & State
23 WELLINGTON, FL
Zip 24 33414 Country 25 USA

2a. Mailing Address
26 12769 WEST FOREST HILL
Suite, Apt. #, etc.
27 SUITE E
City & State
28 WELLINGTON FL
Zip 29 33414 Country 30 USA

9. **Name and Address of Current Registered Agent**

PORRO, HILDA M
13857 WELLINGTON TRACE
SUITE D-1
WEST PALM BEACH FL 33414

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 12769 W. FOREST HILL
83 STE E
84 City WELLINGTON FL 85 Zip Code 33414

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	DYE, P B	
STREET ADDRESS	13857 WELLINGTON TRACE, SUITE D-1	
CITY-ST-ZIP	WEST PALM BEACH FL 33414	
TITLE	S	☐ DELETE
NAME	PORRO, HILDA M	
STREET ADDRESS	13857 WELLINGTON TRACE ,SUITE D-1	
CITY-ST-ZIP	WEST PALM BEACH FL 33414	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (blank)

CR2E034 (12/95)

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)(k), 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: P.B. Dye — P.B Dye Pres 1/30/96 (407) 790-6733

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #