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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # DOMODOSCO71

1. Corporation Name JVS INFORMATION SERVICES INC. Principal Place of Business B386 NW 14TH ST. CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071-6778					
				3. Date Incorporated or Qualific 08/01/1994	od 3a. Date of Last Report 04/29/1996
2. Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 65-0566089	Applied For Not Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stale	6	City & State	<u> </u>	Election Campaign Financing Trust Fund Contribution	
Z(p)	Country 25	Zip 29	Country 30		for intangible tax under s. 199.032,
[24]	g. Name and Address of Curre		190	10. Name and Address of New	
VEN	UTO, JOSEPH		61 Name		
8396 NW 14 ST			82 Street Add	ress (P.O. Box Number is Not Accep	otable)
COR	VAL SPRINGS FL 33071		83		
i			84 City		FL 85 Zip Code
SIGNATURE	Signature: typed or printed name of trigistered a	gent and tite if applicable INO	E: Registered Agent signature requ	ired when reinstating)	ne purpose of changing its registered coupt the appointment as registered
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE	VENUTO, JOSEPH	E DELETE	1.1 TITLE		Change Addition
NAME	8396 NW 14TH ST.		1.2 NAME	•	
STREET ADDRESS	CORAL SPRINGS FL 33071		1.3 STREET ADDRESS		
CHY ST-Z₽	COLUMN CO	DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY - S1 - ZIP			2 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			32 NAME		•
STREET ADORESS			3 3 STREET ADDRESS		`
CITY- ST-ZIP			3.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	·
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME	• •	· .
STREET ADDRESS			4.3 STREET ADDRESS		•
CITY+SI+ZIP			44 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
THILE		☐ DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
C-TY-ST-ZIP		DELETE	54 CITY-ST-ZIP	:	Change Addition
TIFLE		ריין מנרנוג	6.1 RTLE	1	L. Change L. J Addition
NAME (6.2 NAME	:	
STREET ADDRESS			63 STREET ADDRESS		i

14. I do hereby certify that the information supplied with his filing 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 suppliemental 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 portation 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 12 or Block 13 or an attachment with an address.

FILED

Apr 11 1997 8:00am

Secretary of State