FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Jun 23 1997 8:00am
Secretary of State

SECRETARY OF
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # P94000057026

1. Corporation Name
JAGUAR BAIL BONDS INC.

Principal Place of Business	Mailing Address
327 E. Bay St.	327 E. Bay St.
JACKSONVILLE FLA.	JACKSONVILLE, FLA.

2. Principal Place of Business	2a. Mailing Address
21 327 E. Bay St.	26 327 E. Bay St.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 JACKSONVILLE, FLA.	City & State 28 JACKSONVILLE, FLA.
Zip 24 32202 Country 25 DUVAL	Zip 29 32202 Country 30 DUVAL

3. Date Incorporated or Qualified: 8-2-94
3a. Date of Last Report: 5-24-96
4. FEI Number: 59-3335148 ☐ 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

Dale R. Bowman
208-A N. WASHINGTON ST.
JACKSONVILLE, FLA. 32202

10. Name and Address of New Registered Agent

81 Name: Steven KOSLOW
82 Street Address (P.O. Box Number is Not Acceptable): 327 E. BAY ST.
83
84 City: JACKSONVILLE FL 85 Zip Code: 32202

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: STEVEN KOSLOW
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Dale R. Bowman 208-A N. WASHINGTON ST. JACKSONVILLE, FLA. 32202	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	Greg L Phillips 327 E. Bay St. JACKSONVILLE FLA. 32202	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SHERRY B BOWMAN 208 N. WASHINGTON ST. JACKSONVILLE, FLA. 32202	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	~~Steven Koslow~~ ~~327 E. Bay St.~~ ~~JACKSONVILLE, FLA. 32202~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	400002219204 -06/23/97--01002--010 ****173.75 ****173.75	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this 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 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: Greg L Phillips — 5-3-97 — 904-353-5244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

I Greg L Phillips did not receive the 1998 Annual Report and therefore request the late fee be waived.

Greg L Phillips