SECOND AMOUNT DUE	NOTICE: CORPORATION WILL I ON OR BEFORE 8/7/96: \$225 (IF DIS	BE DISSOLVED ON OR AFTER SSOLVED, MINIMUM AMOUNT DI	AUGUS	ST 7, 1996. INSTATE: \$375.)			
COF ANNU	PROFIT CORPORATION ANNUAL REPORT Secretary DIVISION OF CO		RTMENT B. Morth ary of Sta	OF STATE am te			
DOCUI 1. Corporatio	MENT # P9400	00063293 (2)	772.341				
JEFF ENGLISH PLASTERING, INC.)	ill åfib a s lesk:	111 8 44 848 1848 4 (10)
Principal Place of Business Mailing Address							
	20 ZONAL COURT PALM COAST FL 32164 US 20 ZONAL COURT PALM COAST FL 32164 US					-	
					3. Date Incorporated or Qualified 08/22/1994	1	of Last Report 1/1995
2. Principal Pi	2. Principal Place of Business 2a. Mailing Address				4. FEI Number	1	Applied For
Suite, Apt	#, etc	Suite Apt #, etc.			65-0528973		Not Applicable \$8.75 Additional
City & State		City & State			5. Certificate of Status Desired	L.I	Fee Required
23		28			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Ζιρ 24	Country 25				8. This corporation has liability for a		
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Reg		
	NTHARP, PAUL M JR			81 Name			
4 OLD KINGS ROAD NORTH SUITE B				82 Street Address (P.O. Box Number is Not Acceptable)			
PALM COAST FL 32137				83	***************************************		
				84 City		FL	85 Zip Gooe
11. Pursuant t	o the provisions of Sections 607.05	02 and 607, 1508, Florida Statute	s, the ab	l l ove-named corp	noration submits this statement for the purion's board of directors. Thereby accept	rpase of ch	anging its registered
	n tamiliar with and a depting oblig	tions of Section 607.0505, Flo	rida Stali	ules.	or s board or directors. I hereby accept	the appoints	nerit as registered
	Signature typed or protection eight my lag	pent and the supplicative (NO)	Ris(Ls/ere)	1 Agent signature requ	ted when rematability)		
12.	OFFICE MS AN	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND D	······································
NAME	ENGLISH, JEFF		117. 12 N			L	Change [_] Addition \$
STREET ADDRESS	20 ZONAL COURT			REET ADDRESS			
CITY-ST-ZIP	PALM COAST FL 32137		1 4 CI	1 4 CITY - ST - ZIP		إ	
TITLE NAME	d English, Carol	DELETE	2111				Change Add tion C
STREET ADDRESS	20 ZONAL COURT		22N4	HEET ADDRESS			
CITY - ST - ZIP	PALM COAST FL 32137			ITY - ST - ZIP			
THTLE		DELETE	3 1 71	LE			Change Addition
NAME STREET ADDRESS			3 2 NA	ME REEL ADORESS			
CITY-ST-ZIP			1	TY-ST-ZIP			
TITLE		DELETE	4 1 111				Change Add tron
NAME			4 2 N	AME			
STREET ADDRESS CITY-ST-ZIP			1	RELI ADDRESS			
TITLE		DELETE	51 7:1	TY - ST - ZPP LE			Change Addition
NAME			5.2 NA			L I	
STREET ADDRESS			5380	REET ADDRESS			
CITY - ST - ZIP TITLE		DELETE		IY - S1 - ZIP			
NAME		berri	6 1 TH			L.J	Change Add tion
STREET ADDRESS				REF! AUDRESS			
CITY-ST-ZIP	certify that the information supplied	at with the co	64 CI	Y-ST-ZIP			
	y vocury macme information supplie	a wim mis nuncus voluntarily forr	usped ar	na daes not austi	ty for the exemption strend in Scation 41	O OTCOMA 1	Inc. a. Charles I.

SIGNATURE: ___

I do hereby certify that the information supplied with this fining 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

GNATURE:

| Committee and type of the corporation of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

| Committee | 6/15/96 (909)437-1504