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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 06 1997 8:00am Secretary of State

DOCUMENT #	P94000067718	(4)

J.G. MA	SONRY, INC.	``							
Principal Place	o of Business	Mailing Address				-			
1231 WEST PII LANTANA FL 3	NE ST.	1231 WEST PINE ST. LANTANA FL 33462-3036				. ,			
						3. Date Incorporated or Qualified 09/12/1994		ite of Lest Re 01/1996	∍port
	ace of Business	2a. Mailing Address				4. FEI Number			plied For
Suite, Apt	#. etc	26 Suite, Apt. #, etc.				65-0533331		\$8.75 A	t Applicable
22		27				5. Certificate of Status Desired		Fee Re	
City & State	9	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Zip	Country	Zφ	Coun	ntry	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	8. This corporation has liability for			
24	25		30			Florida Statutes	Yes [] No	
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	gistered /	(gent	
	, JOHN C		1'	81	Name				
	1 WEST PINE ST.		[1	82	Street Addr	ess (P.O. Box Number is Not Acceptal	ole)		
LAN	TANA FL 33462-3036		<u> </u>	83					
			Ļ					T1 2	
				84	City		FL	85 Zip C	
11. Pursuant i office or re agent. La	to the provisions of Sections 607.050 egistered agent, or both, in the Stato m familiar with, and accept the oblig	D2 and 607.1508, Florida Statute of Florida, Such change was a pations of, Section 607.0505, Flo	es, the ab outhorized orida Statu	ove- by ites.	named corp the corporat	poration submits this statement for the initial statement for the init	ourpose of pt the app	changing its cintment as	s registered registered
SIGNATURE	F		····						
12.	Signature hypodior printed name of registered ag OFFICERS AN	ent and title if applicable. (NOTE ID DIRECTORS	: Registered	Agen	i signature requir	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND	DIRECTOR	S IN 12
TITLE	P	DELETE	11111	LE		700mondyon Andeo To Office	JE110 / 1140	Change	Addition
NAME	GEE, JOHN C		1.2 NAS	ME	+				
STREET ADDRESS	1231 WEST PINE ST.		1.3 STR	REET A	address				
CITY-SI-ZIP	LANTANA FL 33462-3036		1.4 CIT	Y-ST	- ZIP				
TITLE		DELETE	2.1 TITI					Change	Addition
NAME			2.2 NAI						
STREET ADORESS			4		ADDRESS				
CITY-ST-ZIP TITLE		DELETE	2. 4 CIT		1-217			Change	Addition
NAME			3.2 NA						
STREET ADDRESS			3.3 STF	REET A	ADDRESS				
CHY-ST-ZIP			3.4. CIT	TY-\$1	T-ZIP				
TITLE		DELETE	4.1 TITI	LE				Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STF	REET A	ADDRESS				
CITY+ST-ZIP		- I Drift	4.4 CIT		- ZiP			T 101	1.120
TITLE		☐ DELETE	5.1 TIT					L_j Change	Addition
NAME DIDICE ADDROSOG			5.2 NA		1000ccc				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CIT 6.1 TIT		- LIF	· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition
NAME		Manager of the trial of the	6.2 NAI		1				
STREET ADDRESS					ADORESS				
CITY+S1-7IP			6.4 CIT						
	ny cortify that the information eventure	ad with this bling dose not qualif				d in Section 119 07/3Vi). Florida Statute	as I further	certify that	the

I do hereby certify that the information supplied with this filing does not quality 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 this 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 3 if changed or on the attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/-3/-97 (56) 586-2899

Date Day me Prone 9