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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

FILED Mar 03 1998 8:00am Secretary of State

1, Corporation	on Name	# P94 0 JSE AND RAW		803 (2)						
Principal Plac	e of Busines		Mailin	Mailing Address						
612 N. ORAN	MOF AVE SI	IITE C.6	612 1	612 N. ORANGE AVE., SUITE C-6						
JUPITER FL		,		ER FL 33458	30116 0 0					
								DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified		
A B /2-3-16	N + -(D - :			Discount of the same				09/21/1994		
2. Principal Place of Business			<u> </u>	2a. Mailing Address				4. FEI Number Applied For		
Suite, Apt. #, etc.			26	Suite, Apt. #, etc.				65-0570272 Not Applicable		
22	. #, 010 .		—	27				Certificate of Status Desired See Regulred See Regulred		
City & Stal	 te			City & State				6. Election Campaign Financing \$5.00 May Be		
23	•		-	28				Trust Fund Contribution Added to Fees		
Zip	ip Country			Zip Cour			-	8. This corporation owes or has paid the current year Intangible		
24		25	29		30			Personal Property Tax due June 30. Yes No		
	9, Name	and Address of Co	urrent Registere					10. Name and Address of New Registered Agent		
MI	LLER, JOH	N W				81	Name			
612 N. ORANGE AVE., SUITE C-6			C-6			82	Street Ado	dress (P.O. Box Number is Not Acceptable)		
JUPITER FL 33458								Additional (1.0. box Humber is Not Addeptable)		
i				;						
						84	City	85 Zip Code		
								#L		
office or i	registered as	sions of Sections 50; gent, or both, in the 3 vith, and accept the 4	State of Florida. :	Such change was	authorized	yd t	the corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered		
SIGNATURE										
	Signature, typed	d or printed name of register				Ager	nt signature requ	uired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS DELETE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition				
NAME	MILLER, JOHN W			12 N/						
STREET ADDRESS 18775 S.E. RIVER RIDGE ROA			POAD				ADDRESS			
CITY-ST-ZIP TEQUESTA FL 33469			NOAD	1			- ZIP			
TITLE	ILGOL	01A 1 L 00403		DELETE 2.17			- 214	☐ Change ☐ Addition		
NAME			-		2.2 NA					
STREET ADDRESS	is)			Ī		2.3 STREET ADDRESS		· ·		
CITY-S1-ZIP				i i			T-ZiP			
TITLE				DELETE 3.1				☐ Change ☐ Addition		
NAME]				3.2 NA	ME	1	· • -		
STREET ADDRESS	1				3.3 ST	REET #	ADDRESS			
CITY-ST-ZIP	!				3.4. CI	TY-S1	T-ZIP			
TITLE				DELETE	4.1 TIT			☐ Change ☐ Addition		
NAME					4, 2 NA	AME	İ			
STREET ADDRESS				4.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP					4.4 CIT	ry-st	- ZIP			
TITLE	☐ DELETE			5.1 TITLE		☐ Change ☐ Addition				
NAME					5.2 NA	ME	l			
STREET ADDRESS					5.3 STF	AEET A	address (
CMY-ST-ZIP					5.4 CiT	Y-ST	- ZIP			
TALE				DELETE	6.1 TIT	LE		Change Addition		
NAME					6.2 NA	ME	[
STREET ADDRESS					6.3 ST	REET A	ADDRESS			
CITY-ST-ZIP				6.4 CIT						
4.4 Iherebya	certify that th	a information cumplic	ad with this filing	does not qualify f	or the exe	mnti	ion etated in	n Section 119 07(3)(i) Florida Statutes I further certify that the information		

Thereby certify that the information supplied with this litting 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 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 any attachment with any address.