FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000074486 (9)

JHA, II	NC.							
Principal Place	of Business	Ma∄ing Address				HOU OOM OU	IN MODIN DONIS HOBIE DIDIN	AINDI LAKKA AKI 1906
70 6TH AVE SHALIMAR FL 32579		PO BOX 800 SHALIMAR FL 32579						
9 Deinster Dis	oo of Duries		A for	, , , , , , , , , , , , , , , , , , , ,	3. Date Incorporated or 01/01/1995	Qualified	3a. Date of Last	Report
 Principa' Plad Plade 	ice of Business	2a. Mailing Address	s		4. FEI Number	2)7	4950	Applied For
'.L	. etg.	Suite, Apt. #, al	IG.		3 1-			Not Applicable
2		27			5. Certificate of Status [Desired		75 Additional e Required
City & State	,	City & State			6. Election Campaign Fi	inancing	\$5	00 May Be
3	T	28			Trust Fund Contributi	ion		led to Fees
Ζφ 4	Country	Zip	Count	'y	8. This corporation has		. **	s 199.032,
•1	25 9. Name and Address of Co	29 urrent Registered Agent	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
		The state of the s	8	1 Name	IV. Name and Address	OI NOW H	egistereo Agent	
HARRIS	ON, JOHN			1				
70 6TH			8:	2 Street Add	dress (P.O. Box Number is No	t Acceptabl	e)	
	AR FL 32579		8	3				
			-	4 00				
			8-	4 City			FL 85	Zip Code
		.0502 and 607.1508, Florida S Florida. Such change was aut		named corpo poration's boa	oration submits this statement and of directors. I hereby accer	for the purp pt the appo	ose of changing its intment as register	ed agent. Lam
familiar with	i, and accept the obligations of,	Section 607.0505, Florida Sta	(NOTE Registered Ag	poration's boa	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE DATE	ed agent. I am
familiar with	i, and accept the obligations of,	Section 607.0505, Florida Sta	(NOTE Registered Ag	poration's boa	are of directors. Thereby accep	pt the appo	DATE CERS AND DIREC	ORS IN 12
familiar with	and accept the obligations of, Separate types or probations of a grant of the obligations of the obligation	Section 607.0505, Florida Sta agret and the happlicable S ANO DIRECTORS	(NOTE Registered Ap	poration's boa	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE DATE	ORS IN 12
familiar with	is and accept the obligations of,	Section 607.0505, Florida Sta agret and the happlicable S ANO DIRECTORS	(NOTE Registered Ag 13. 1 1 Title 1 2 NAME	poration's boa	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC	ORS IN 12
familiar with SIGNATURE 8 2. HLE AME PREFFADURESS	i. and accept the obligations of, OFFICERS D HARRISON, JOHN	Section 607.0505, Florida Sta agret and the happlicable S ANO DIRECTORS	(NOTE Registered Ag 13. 1 1 Title 1 2 NAME	poration s poa	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC	ORS IN 12
familiar with SIGNATURE S 2. HUE SAME PREFITATIONESS PLY-ST-ZIP	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D	Section 607.0505, Florida Sta agret and the happlicable S ANO DIRECTORS	(NOTE Registered Ag 1 1 THE 1 2 NAME 1.3 STREE 1.4 City-	poration S Doa	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC	ORS IN 12
familiar with	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA	Section 607.0505, Fiorida States a piet and the imperication S ANO DIRECTORS DELETE	(NOTE Registered Age 1 1 Title 1 2 NAME 1.3 STREE 1.4 City	poration's book with signature rectains If ADDRESS S1-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIRECT Change	ORS IN 12
Familiar with SIGNATURE S. 2. HEF SAME SEEL ADDRESS PTY-ST-ZIP SEEF AME	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0505, Fiorida States a piet and the imperication S ANO DIRECTORS DELETE	(NOTE Fagorered Ap 13. 1 1 Title 1 2 NAME 1.3 STREE 1.4 CITY 2 1 TITLE 2 2 NAME	poration's book with signature rectains If ADDRESS S1-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIRECT Change	ORS IN 12
familiar with SIGNATURE S 2. IILE AME PRET ADDRESS INV-ST-ZIP CLE AME THEFT ADDRESS TY-ST-ZIP	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA	Section 607.0505, Fiorida States and the report and the report about DELETE	(NOTE Fagorered Ap 13. 1 1 Title 1 2 NAME 1.3 STREE 1.4 CITY 2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY	poration's book init signature recipire I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIRECT Change	ORS IN 12
familiar with familiar with SIGNATURE 2. III.E SAME PRET ADDRESS DIV. ST. 7IP DLE AME INFEL ADDRESS TY-ST-7P	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0505, Fiorida States a piet and the imperication S ANO DIRECTORS DELETE	(NOTE RESIDENCE AS A 1 1 TITLE 12 NAME 1.3 STREE 1.4 CITY-2 1 TITLE 22 NAME 2.3 STREE 2.4 CITY-3.1 TITLE 3.1 TITLE 3	poration's boardine recipies If ADDRESS ST-ZIP If ADDRESS ST-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIRECT Change	FORS IN 12 CORS IN 12 Addition
Familiar with SIGNATURE S 2. THE SAME PREFE ADDRESS PLY-ST-ZIP CLE SAME STANDERSS PLY-ST-ZIP CLE SAME STANDERSS PLY-ST-ZIP CLE SAME STANDERSS PLY-ST-ZIP CLE SAME STANDERSS PLY-ST-ZIP CLE SAME SAME SAME SAME SAME SAME S	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0505, Fiorida States and the report and the report about DELETE	(NOTE RESIDENCE A) 13. 1 1 TILLE 1 2 NAME 1 3 STREE 2 2 NAME 2 3 STREE 2 4 CITY 3 1 TILLE 3 2 NAME	if ADDRESS ST-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIRECT Change	FORS IN 12 CORS IN 12 Addition
Familiar with SIGNATURE S 2. HEF ADDRESS PLY-ST-ZIP CLE AME TADDRESS PLY-ST-ZIP LIFE TADDRESS PLY-S	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0505, Fiorida States and the report and the report about DELETE	(NOTE ANGISTERIAL AG 13. 1 1 TITLE 12 NAME 13 STREE 14 CITY 2 1 TITLE 22 NAME 23 STREE 24 CITY 3 1 TITLE 32 NAME 33 STREE	FI ADDRESS SI-ZIP II ADDRESS SI-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIRECT Change	FORS IN 12 CORS IN 12 Addition
Familiar with signature 5 12. ITHE FAME OF BET ADDRESS OF STORE 1 AD	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0506, Fiorida States and Cardinary Complete States St	(NOTE PROSPERED A) 1 1 TITLE 1 2 NAME 1 3 STREE 2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY 3 1 TITLE 3 2 NAME 3 3 STREE 3 4 CITY	IT ADDRESS ST-ZIP ET ADDRESS ST-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change	FORS IN 12 CORS IN 12 Addition Addition
Familiar with signature s 12. ITHE FAMILIAN STATE S OFFICE ADDRESS OFFICE SAME THE FLADORESS OFFICE SAME OFFICE SA	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0505, Fiorida States and the report and the report about DELETE	(NOTE ANGISTERIAL AG 13. 1 1 TITLE 12 NAME 13 STREE 14 CITY 2 1 TITLE 22 NAME 23 STREE 24 CITY 3 1 TITLE 32 NAME 33 STREE 34 CITY 4 1 TITLE	I ADDRESS S1-ZIP ET ADDRESS S1-ZIP ET ADDRESS S1-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIRECT Change	FORS IN 12 CORS IN 12 Addition Addition
Familiar with SIGNATURE S 12. ITHE SPECIAL ADDRESS STATE STATE STATE SAME STATE STATE STATE SAME SHELL ADDRESS SH	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0506, Fiorida States and Cardinary Complete States St	(NOTE ANGIOTERIA) 1 1 TITLE 12 NAME 13 STREE 24 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 4 TITLE 42 NAME	I ADDRESS S1-ZIP ET ADDRESS S1-ZIP ET ADDRESS S1-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change	FORS IN 12 CORS IN 12 Addition Addition
Familiar with signature si	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0506, Fiorida States and Cardinary Complete States St	(NOTE ANGIOTERIA) 1 1 TITLE 12 NAME 13 STREE 24 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 4 TITLE 42 NAME	IT ADDRESS ST-ZIP T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change	FORS IN 12 CORS IN 12 Addition Addition
FORTING WITH SIGNATURE S 2. IILE MME PREFI ADDRESS PLY-ST-ZIP THE TADDRESS PLY-ST-ZIP THE TADDRESS PRY-ST-ZIP	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0506, Fiorida States and Cardinary Complete States St	(NOTE PROSPERED A) 13. 1 1 TITLE 12 NAME 1.3 STREE 2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY 3 1 TITLE 3 2 NAME 3 3 STREE 3 4 CITY 4 1 TITLE 4 2 NAME 4 3 STREE 4 4 CITY	ET ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change	FORS IN 12 CORS IN 12 Addition Addition Addition
FORTING WITH SIGNATURE 2. IILE AME PREFITATIONESS TY-ST-ZIP THE AME THE LADDRESS TY-ST-ZIP THE AME THE LADDRESS TY-ST-ZIP THE AME THE LADDRESS TY-ST-ZIP THE THE LADDRESS TY-ST-ZIP THE	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0506, Fiorida States a yet and the Pappheable S AND DIRECTORS DELETE DELETE	(NOTE RESIDENCE AS A CITY-4 1 TITLE 42 NAME 43 STREE 44 CITY-	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change	FORS IN 12 CORS IN 12 Addition Addition Addition
FORTING WITH SIGNATURE 2. ITHE AME PRET ADDRESS PLY-ST-ZIP THE ADDRESS PLY-ST-ZIP THE AME THE TADDRESS PLY-ST-ZIP THE AME THE ADDRESS PLY-ST-ZIP THE AME	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0506, Fiorida States a yet and the Pappheable S AND DIRECTORS DELETE DELETE	(NOTE RESIDENCE AS A CITY- 3 1 TITLE 12 NAME 1.3 STREE 2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY- 3 1 TITLE 4 2 NAME 4 1 TITLE 4 2 NAME 4 3 STREE 4 4 CITY- 5 1 TITLE 5 2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change	FORS IN 12 CORS IN 12 Addition Addition Addition
Familiar with signature signature state in the same present adoress sity of the same signature s	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0505, Fiorida States apertured the Papphilable S AND DIRECTORS DELETE DELETE DELETE	(NOTE RESIDENCE AS A CITY- (NOTE RESIDENCE AS A CITY- 2 1 TITLE 2 2 NAME 2 3 STREE 2 4 CITY- 3 1 TITLE 4 2 NAME 4 3 STREE 4 4 CITY- 5 1 NILLE 5 2 NAME 5 3 STREE 5 4 CITY-	T ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP I ADDRESS S1-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change	FORS IN 12 CORS IN 12 Addition Addition Addition
Familiar with signature si	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0506, Fiorida States a yet and the Pappheable S AND DIRECTORS DELETE DELETE	(NOTE RESIDENCE AS A CITY- (NOTE RESIDENCE AS A CITY- (NOTE RESIDENCE AS A CITY- 2 1 TITLE 2 2 NAME 2 3 STREE 3 4 CITY- 4 1 TITLE 4 2 NAME 4 3 STREE 4 4 CITY- 5 1 TITLE 5 2 NAME 5 3 STREE 5 4 CITY- 6 1 TITLE	T ADDRESS S1-ZIP IT ADDRESS S1-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change	FORS IN 12 B Addition Addition Addition Addition
Familiar with SIGNATURE 12. 12. 14. 15. 16. 16. 16. 16. 16. 16. 16	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0505, Fiorida States apertured the Papphilable S AND DIRECTORS DELETE DELETE DELETE	(NOTE RESIDENCE AS A CITY- 1 TITLE 1 NAME 1 STREE 2 NAME 2 STREE 2 A CITY- 3 TITLE 4 CITY- 5 TITLE 5 NAME 5 STREE 5 CITY- 6 TITLE 6 NAME	T ADDRESS ST-ZIP IT ADDRESS ST-ZIP	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change Change	FORS IN 12 B Addition Addition Addition Addition
familiar with	of and accept the obligations of OFFICERS D HARRISON, JOHN 70 6TH AVE SHALIMAR FL 32579 D HARRISON, ESTELA 70 6TH AVE	Section 607.0505, Fiorida States apertured the Papphilable S AND DIRECTORS DELETE DELETE DELETE	(NOTE RESIDENCE AS A CITY- 1 TITLE 1 NAME 1 STREE 2 NAME 2 STREE 2 A CITY- 3 TITLE 4 CITY- 5 TITLE 5 NAME 5 STREE 5 CITY- 6 TITLE 6 NAME	T ADDRESS ST-ZIP T ADDRESS	ard of directors, I hereby accepted when reinstaling)	pt the appo	DATE CERS AND DIREC Change Change Change	FORS IN 12 B Addition Addition Addition Addition

SIGNATURE:

964-651-6777 Daytime Phone II