FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 APR 20 PM 2:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000078355 (2)

1. Corporate Name
JAL SERVICES, INC.

Principal Address
830 N. 69TH AVENUE
HOLLYWOOD FL 33024

Mailing Address
830 N. 69TH AVENUE
HOLLYWOOD FL 33024

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/24/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt # etc — 22
Suite Apt # etc — 27
City & State — 23
City & State — 28
Zip — 24 — 25 Country
Zip — 29 — 30 Country

4. FEI Number: 65-0526451 — 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
SIVERIO, E.
2009 S.W. 98TH TERRACE
MIRAMAR FL 33025

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, 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

12. OFFICERS AND DIRECTORS	13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12
P ALZATE, LUIS O 830 N. 69TH AVENUE HOLLYWOOD FL 33024	Change / Addition
ST ALZATE, BEATRIZ E 830 N. 69TH AVENUE HOLLYWOOD FL 33024	Change / Addition
	Change / Addition
	Change / Addition
	Change / Addition
	Change / Addition

14. I do hereby certify that the information supplied with this filing 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or has just or is an attachment with an address.

SIGNATURE: [signature] April 25/95
PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0006214 CP

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AMENDED

1995 4-27-95 B 4947

DOCUMENT # P94000078732 (2)

1. WHITESTEINS, INC.

115 W BEARSS AVE TAMPA FL 33613	115 W BEARSS AVE TAMPA FL 33613

3. Date of Incorporation / Qualification: 10/25/1994

3a. Date of Last Report:

21	8875 HIDDEN RIVER PKWY	26 8875 HIDDEN RIVER PKWY
22	SUITE # 125	27 SUITE # 125
23	TAMPA FLORIDA	28 TAMPA FLORIDA
24	33637 25 USA	29 33637 30 USA

4. FEI Number: 59-3279993 — 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. Does corporation consider itself to be engaged in business under F.S. 607.1501 (Florida Statutes): Yes / No

9. Name and Address of Current Registered Agent

WHITE, LORRIE
115 W BEARSS AVE
TAMPA FL 33613

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Designation of Registered Agent/Resident Agent. 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. The corporation is aware that any false information submitted in a document to the Department of State for the purpose of changing its registered office or registered agent, or both, constitutes a misdemeanor of the first degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084, Florida Statutes. To the best of my knowledge and belief, I state that the corporation has been authorized by its board of directors to file this statement, and that the facts stated herein are true. I am familiar with and accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature of New Registered Agent, if changed)

12. FOR OFFICE AND/OR DIRECTOR CHANGES

Title	D
Name	WHITE, LORRIE
Address	115 W BEARSS AVE
City-State-Zip	TAMPA FL 33613

13. ADDITIONS/CHANGES TO OFFICERS AND/OR DIRECTORS

Title	
Name	
Address	512 Cypress Ln
City-State-Zip	Lutz, FL 33549

Change / Addition

14. To the best of my knowledge and belief, this report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: Lorrie S. White — Lorrie S. White — 4-24-95 — (813)975-0888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0290151 CP