## 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

P94000080325 (1)

DOCUMENT #

1. Corporation Name JAG/WIRE INC.

Principal Place of Business	Mailing Address
2637 WEST BEAVER STREET JACKSONVILLE FL 32554	OVERTOXNOCKY SOURCE X #170 DOVER Y



JACKSONVILLE FL 32554 US			OBUNGE OUBSING CONTROLEXXX								
						<ol> <li>Date Incorporated or Qualified 11/02/1994</li> </ol>	3a. D	3a. Date of Last Report 05/11/1995			
		- T 0-	Madian Address		<u> </u>		4. FEI Number				oplied For
. Principal Place	of Business		Mailing Address P.O. Box 61	863			59-3282345		ļ	N	ot Applicable
Suite, Apt. #, etc.		26	26 P.O. BOX 61863 Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required					
ļ		27						\			
City & State			City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
		28	Jacksonvill				Trust Fund Contribution  8. This corporation has lability for	- Aibi			
Zip	Country		Zip	<b>⊢</b> ¬	untry		8. This corporation has lability to	s DANO	e lax unc	101 5	133.002,
]	25	29	32236	30	]	<u>USA</u>	10. Name and Address of New			t	
	9. Name and Address of Currer	nt Regis	stered Agent		81	Name	10. Name and Address of Non-				
					18,						
KING, D	AVID A				82	Street Ad	idress (P.O. Box Number is Not Accept	able)			
	EY AT LAW				<u> </u>			<del></del>			
	NGSLEY AE				83						
	E PARK FL 32073				84	City			. 85	Ζφ	Code
-,					1	, .	poration submits this statement for the poard of directors. I hereby accept the ap		FL  °	4_	
ON ATURE	and accept the obligations of, Sec				ad Ace	ent sionature rec	nured when reinstahing)	DAT			
	nature, typed or printed name of registered ago: OFFICERS AN	or and title i		13		in agrande to	ADDITIONS/CHANGES TO C	FFICERS	AND DIF	ECTO	RS IN 12
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TLE	D CONTRACTOR E		<u></u> ·	12	NAME		27-7-				
AME	GIBBS, JOSEPH E					T ADDRESS					
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ITY-ST-ZIP	JACKSONVILLE FL 32220	<u> </u>	T) DELETE		1 TITLE		D,VP,S		<b>⊠</b> 0	nange	Addition
HITLE	D DIGUETT MILLIANS D				NAME		5,11,5				
4AME	PICKETT, WILLIAM R					T ADDRESS					
STREET ADDRESS	3353 MABRY TER	ì				ST-ZIP					
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CITY-ST-ZIP			1 m 1 1 1 1 2 4 5 m	niahasi s	4 CITY	r-ST-ZIP	alify for the exemption stated in Section	119.07(3)(	(k), Florid	a Stati	ites. I further

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 certify 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 changed, or on an attachney with an artifices.