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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 06 1997 8:00am

Secretary of State

Daylime Prione # 0006788

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000081394 (6)

JAR PROPERTIES, INC.

Principal Place of Business

ONE N. UNIVERSITY DR. SUITE A-111 PLANTATION FL 33324		ONE N. UNIVERSITY DR. SUITE A-111 PLANTATION FL 33324-2031		Date Incorporated or Qualified 11/04/1994	3a. Date of Last Re 12/23/1996	port	
2. Principal Pi	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number 65-	D7 14374 App	lied For
21		26		·	- 65 0478883		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22 Columb Charles		City & State		·		Fee Req	·
City & State)	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 N	
Z (p)	Country	28	Count	nv	Trust Fund Contribution 8. This corporation has liability for		
24	25	29	30	' 7		r intangible tax under s. Yes No	189.03E
141	9. Name and Address of Currer				10. Name and Address of New R		
PAYI	NE, ESQ., JOHN H		8	1 Name			
	N. UNIVERSITY DR.		8	2 Street Add	Idress (P.O. Box Number is Not Accepte	ahla)	
	E A-111		Ľ	E UNIVOLVIO	uiges (1.0. Don Harristo) is 110, 110, 110, 110, 110, 110, 110, 110	(DIC)	
	VITATION FL 33324		B	3			
			8	4 City		85 Zip C	nda
				4 Oily		FL B	
SIGNATURE	Signature, typical or profession of registered age OFFICERS AN		13.		guired when reinstating) ADDITIONS/CHANGES TO OFF		5 IN 12
NAME STREET ADORESS CITY: \$1-ZIF	MARKHAM, SHARON R. 4747 N OCEAN DR. #216 SEA RANCH LAKES FL	LJ VELETE	1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY	ET ADDRESS .		L_J Change	L. Audition
TITLE		DELETE	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAM				
STREET ADDRESS				ET ADDRESS			
611-9-14		DELETE		/-ST-ZIP		Change	Addition
TITLE			3.1 TITLE	1		Change	Addition
NAME CONTRACTOR	ı		3.2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY - ST - ZIP		DELETE	4.1 TITLE	r-ST-ZIP		Change	Addition
NAME			4.2 NAM	1		hand with the	
STREET ADDRESS				ET ADDRESS			
CHY-SI-ZIF			4.4 C/TY				
THLE		☐ DELETE	5.1 TITLE	·····		Change	Addition
NAME			5.2 NAM		•	•	
STREET ADORESS			- 1	EET ADDRESS			
CITY-S1-ZIP				-ST-ZIP			
TITLE		. DELETE	6.1 TITLE			Change	Addition
NAME		-	6.2 NAM	1	\$		
STREET ADDRESS			1	EET ADDRESS			
			6.4 CITY				
City-St-ZiP 14. Ldo heret	by certify that the information supplic	ed with this filing does not quali			ted in Section 119.07(3)(i), Florida Statu	tes. I further certify that t	he
informatic	on indicated on this annual report or a	supplemental annual report is t	true and ec	curate and th	nat my signature shalf have the same legort as required by Chapter 607, Florida	gal effect as if made und	ier oath; tha