

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra P. Mitchell
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000092605 (2)

1. Corporation Name
JAY CORPORATION



Principal Place of Business
**78 N.E. 93RD STREET
MIAMI SHORES FL 33138**

Mailing Address
**78 N.E. 93RD STREET
MIAMI SHORES FL 33138**

3. Date Incorporation or Qualified **12/21/1994** 3a. Date of Last Report **03/17/1995**
4. FIC Number **65-0541987** Applied For Not Applicable
5. Certificate of Status Declared **\$8.75 Additional Fee Required**
6. Election of Corporate Filings or Trust Form Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 194.032 Florida Statutes Yes No
10. Name and Address of New Registered Agent

2. Principal Place of Business
21. State App. No.
22. City & State
23. Zip Country
24. Country

2a. Mailing Address
26. State App. No.
27. City & State
28. Zip Country
29. Country

9. Name and Address of Current Registered Agent

**YOUNES, JOHN A
78 N.E. 93RD STREET
MIAMI SHORES FL 33138**

81. Name ~~JAY CORPORATION~~ **JAY CORPORATION**
82. Street Address (P.O. Box Number is Not Acceptable) **19420 N.W. 4 CT**
83. **Pembroke Pines, FL**
84. City **FL** 85. Zip Code **33029**

11. Pursuant to the provisions of Sections 607.011 and 607.012, Florida Statutes, the undersigned, named as the registered agent, hereby certifies that the information furnished herein is true and correct, and that the undersigned is familiar with the contents of the report and is qualified to act as the registered agent. I am familiar with the contents of Sections 607.011 and 607.012, Florida Statutes.

SIGNATURE

[Signature]
OFFICER AND DIRECTOR

3/8/96

~~3/17/95~~

Table with 12 rows and 2 columns. Column 1: OFFICERS AND DIRECTORS. Column 2: ADDITIONAL OFFICERS AND DIRECTORS. Rows include fields for Title, Name, Street Address, City, State, Zip, and Telephone.

Table with 13 rows and 2 columns. Column 1: ADDITIONAL OFFICERS AND DIRECTORS. Column 2: ADDITIONAL OFFICERS AND DIRECTORS. Rows include fields for Title, Name, Street Address, City, State, Zip, and Telephone.

14. I hereby certify that the information supplied herein is true and correct, and that I am qualified to act as the registered agent. I am familiar with the contents of the report and is qualified to act as the registered agent. I am familiar with the contents of Sections 607.011 and 607.012, Florida Statutes.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/96 (154) 431-5355

CR2E034 (12/95)