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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500000934 (6)

J & G COMMUNICATIONS OF TAMPA, INC.

Principal Place of Business

Mailing Address

FILED Sep 03 1997 8:00am Secretary of State



WESLEY CHAI	PEL FL 33543	WESLEY CHAPEL FL 3354				
					3. Date Incorporated or Qualified 01/03/1995	3a. Date of Last Report 08/05/1996
2. Principal P 21 /660 Suite, Apt.	Place of Business 2 SardiNera DE AVIL	2a. Mailing Address 26 PO BOX 2	409	e'	4. FEI Number	321 993 Not Applicable
22 22	, π, θιο.	27 Suite, Apt. #, etc.	•		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State			<i></i>		6. Election Campaign Financing	\$5.00 May Be
23 TAMPA Country Zip AMPA, F			Countr	Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032,		7,0000,10,1000
24	/ 3363 25	29 2362-3	30	у		ntangible tax under s. 199.032, Yes : No
	9, Name and Address of Current				10. Name and Address of New Re	
BROOKS, JUDY				81 Name		
30312 LAURELWOOD LANE WESLEY CHAPEL FL 33543			82	82 Street Address (P.O. Box Number is Not Acceptable)		
			83	83		
			84	'		FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State c am familiar with, and accept the obligat	and 607.1508, Florida Statute f Florida. Such change was a ions of, Section 607.0505, Flo	s, the abov uthorized b rida Statute	ve-named cor by the corpora s.	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered agent OFFICERS AND		Hegistered Ag	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
TITLE	V	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	BROOKS, HUBERT		1.2 NAME			
STREET ADDRESS	16602 JARDINERA DE AVILA		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	TAMPA FL 33613		1.4 C/TY-	ST - ZIP		
TITLE	P	DELETE 2.1 TI				Change Addition
NAME	HOLLAND, GWEN		22 NAME			
STREET ADDRESS	16602 JARDINERA DE AVILA		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	TAMPA FL 33613			ST - ZIP		
TITLE NAME	S Brooks, Judy	DELETE 3.1 TIT				Change Addition
STREET ADDRESS	30303 LAURELWOOD LANE		3.2 NAME	T ADDRESS		
CITY-ST-ZIP	WESLEY CHAPEL FL 33543		3.4. CITY-			
TITLE			4.1 TITLE	31-21		Change Addition
NAME		_	4. 2 NAME			
STREET ADDRESS			4.3 STREE	I ADDRESS		
CITY-ST-ZIP			4.4 CITY - 1	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREE			
CITY-ST-ZIP		T DELETE	5.4 CITY-5	ST-ZIP		Chesco
TATLE NAME		DELETE TO	6.1 TITLE			Change Addition
STREET ADDRESS			6.2 NAME	t YDDDCCC		
CITY-ST-ZIP			6.3 STREET			
VIII*Q1*2ff			■ 0.9 UHY-3	11-71F I		

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 3 if changed, or on an attachment with an address.