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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

813-979-4454 Destrine Prone #

1996

P95000003291 (8) **DOCUMENT #**

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

JPS & ASSOCIATES INTERNATIONAL, INC.

Principal Place	of Business	Malling Address						
15704 CHADW TAMPA FL 33		15704 CHADWICK COURT TAMPA FL 33647						
					3. Date Incorporated or Qualified 01/12/1995	3a. Date	of Last Re	port
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	· -	L	oplied For
21 15903 Wainwright Court 26 15903 Wainu		iright Count		59-3288846			lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition			
City & State 23 Tampa, FL		City & State 28 Tampa, FL		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 33(Country	Zip	Country 30		8. This corporation has liability for in	ntangible ta ⊠No	x under s	199.032,
24 00	g. Name and Address of Current				10. Name and Address of New R		Agent	
			81	Name	Q V'			
AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES FL 33134				82 Street Address (P.O. Box Number is Not Acceptable)				
				Street Add	103 Wainwright C	Surt		
- · · · · -			84	City -			85 Zip	Code
				I	ampa pration submits this statement for the pur	FL	3	3647
SIGNATURE	Suson King Signature, typed or printed name of registered agents	ard the Lappicable (NOTE	JUNG Hesistan di Agen		ed when reinstating!	4/29/9	76	
TITLE	OFFICERS AND	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF		Change	Addition
NAME	KING, JOHN C		1.2 NAME		INIC TAILS!		gronunge.	
STREET ADDRESS	15704 CHADWICK COURT		1.3 STREET	ADDRESS	ING, JOHN C 6903 Wainwright Co Tampa, FL 336	urT		
CITY-ST-ZIP			1.4 CITY-S	1-719	Tampa FL 336	47		
TITLE		DELETE 2.1				[Change	Addition
NAME		- -	2.2 NAME					
STREET ADDRESS			2.3 STREET	ADDRESS				
CHTY-ST-ZIP			2.4 CITY - S	T-ZIP				
TITLE			3 1 TITLE			[Change	Addition
NAME			3.2 NAME	Ì				
STREET ADDRESS			3.3. STREET					
CITY-ST-ZIP		FT3 No. exc	3.4 C/TY - S	iT-ZIP			7 06000	Fill Addition
TITLE		DELETE	4. 1 TITLE			L	Change	Addition
NAME			4 2 NAME					
STREET ADDRESS	1		A 3 STREET	ADDRESS				
CITY - ST - ZIP								
		L_3 DE1 ELE	4.4 CITY - S				☐ Change	☐ Addition
TITLE		DELETE	44 CITY-S 5 1 TIBLE			ī	Change	Addition
TITLE NAME		DELETE	4.4 City-S 5.1 Title 5.2 NAME	ST-ZIP		(Change	Addition
TITLE NAME STREET ADDRESS		☐ DELETE	4.4 CITY - S 5.1 TITLE 5.2 NAME 5.3 STREET	ST-ZIP ADDRESS		(Change	Addition
TITLE NAME		☐ DELETE	4.4 City-S 5.1 Title 5.2 NAME	ST-ZIP ADDRESS			Change	Addition

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 if changed, or on an attachment with an address.

JOHN KING

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