H22/98 B5246 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500003438 (5)

JAB INVESTMENTS, INC.

and the second second second

FILED Apr 22 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								
1301 RIVERPLACE BLVD. STE. 2552 1301 RIVERPLACE BLVD. STE. 2552								
JACKSONVILLE FL 32207			JACKSC	JACKSONVILLE FL 32207				DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified
								01/11/1995
2.	Principal Pi	lace of Business	2a, Mailir	ng Address				4, FEI Number Applied For
21			├ ─-1	26				59-3301761 Not Applicable
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				SR 75 Additional
22			27	27				5. Certificate of Status Desired Fee Required
	City & State City & St			State				6. Election Campaign Financing \$5.00 May Be
23	3 28							Trust Fund Contribution Added to Fees
	Zip	ip Country 7ip C			Cou	ntry		8. This corporation owes or has paid the current year Intangible
24		25	29		30			Personal Property Tax due June 30. 🔀 Yes 🗌 No
ļ		g. Name and Address of Cu	irrent Registered	Agent			· · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered Agent
ALLEN, LAURA H						81	Name	
1301 RI VERPLACE BLVD STE 2552 JACK SO NVILLE FL 32207			2552			82	Street A	Address (P.O. Box Number is Not Acceptable)
CACIOCITIELE I E OZEGI						83		
						84	City	FL 85 Zip Code
-	Pureuanti	to the provisions of Sections 607	7.0502 and 607.150	18 Florida Statut	es the a	20/6	e-named (
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, typed or prelied name of registered agent and title of applicable (NOTE Registered Agent signature required when re-instating								e required when reinstating) DATE
12			AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	LE	PTS		DELETE	1.170	TLE	T	Change Addition
N/A	ME	ALLEN, JOHN J			1.2 NA	ME		
STREET ADDRESS 1301 RIVERPLACE BLVD. STE		STE. 2552	j 2 1,3 S'		REET.	ADDRESS		
CF	TY-ST-ZIP	JACKSONVILLE FL 32207	7		1.4 CI	1Y - S1	T - Z(P	
TIT	TLE .	VPD		DELETE	2.1 7(1	ΙLÉ		Change Addition
N.A	NAME WALCHLE, BART			■ · = ·		2.2 NAME		
ST	STREET ADDRESS 1301 RIVERPLACE BLVD. STE			238		2.3 STREET ADDRESS		1502 Roberts Dr.
CITY-ST-ZIP JACKSONVILLE FL 32207			•		2.4 CITY-ST-ZIP		T-ZIP	1502 Roberts Dr. Jacksonville Beach, Fl. 32250
TIT	TITLE			DELETE 3.1 TI		LE		Change Addition
N/A	ME				3.2 NA	LME.	}	
ST	REET ADDRESS				3.3 ST	REET	address	
				3.4. C	3.4. CITY - ST - ZIP			
10	LE			L_ DELETE	4.1 10	LE		Change Addition
NA	ME	ı			4. 2 N	AME		
ST	REET ADDRESS				4.3 \$1	REET	ADDRESS	
	TY-ST-ZIP				4.4 Ci		1-ZIP	
	LE			DELETE	5.1 TIT			Change Addition
	ME				5.2 NA		1	
	REET ADDRESS				- 1		ADDRESS	
_	IY-ST-ZIP			DELETE	5 4 CF		T-ZIP	Observa D Address
[TLE .			DELETE	6.1 TJ		- 1	Change Addition
1	ME				6.2 N/4		-	
ST	REET ADDRESS				6.3 S1	REET	ADDRES\$	

14. I 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 angual 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 entrusted 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 attack migrature and address.