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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 21 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000011777 (6)

JAS OF BRANDON, INC.

Principal Place	e of Business		Mailing Address						T AMMILIANT STA EATHE MISSIN MAISIN MAISIN MAI		i ilikir imbat imbii) (MA) (AA)
3805 SOUTH NINE DRIVE VALRICO FL 33594				3805 SOUTH NINE DRIVE VALRICO FL 33594-8268					4			
									Date Incorporated or Qualified 02/10/1995		ale of Last Re /25/1996	
-	lace of Business	-		ing Address				4.	FEI Number	,		plied For
21	# e10		26	e. Apt. #. etc.	· · · · · · · · · · · · · · · · · · ·			-	59-3308350			of Applicable
Surie, Apt.	#, etc.		27	s, Apt. #, 8tc.				5.	Certificate of Status Desired		\$8.75 A	
City & State	е		City	& State				6.	Election Campaign Financing		\$5.00	May Be
23			28						Trust Fund Contribution		Added t	
Zip	Cou	´ .	Zip			intry		8.	This corporation has liability for			. 199.032,
24	25 25	iress of Current R	29	Anent	30	· · · · · ·			Florida Statutes Parents Plant	Yes [
			ogistarac	Main		81	Name	10.	I I I I I I I I I I I I I I I I I I I	Aistoian	Agent	
	RTMAN, JEFFREY I											
3805 SOUTH NINE DR. VALRICO FL 33594						82	Street Add	dress (I	P.O. Box Number is Not Acceptat	ole)		
174	11100 1 2 00001					83						
						84	City			FL	85 Zip (Code
11. Pursuant office or r	to the provisions of S egistered agent, or b im familiar with, and a	ections 607.0502 at oth, in the State of I	nd 607.15 Florida, Si	08, Florida Statu uch change was tion 607.0505. F	tes, the a authorize lorida Sta	bove d by tutes	e-named cor the corpora	rporation's	on submits this statement for the population of directors. I hereby acceptions		f changing its pointment as	s registered registered
SIGNATURE		,		,								
	Signature, typed or printed n					d Apa	per evutengie Inc			DATE		
12.		OFFICERS AND D	RECTOR	S DELETE	13. 1.1 T	TIE	<u> </u>		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR Change	S IN 12 Addition
title Name	d Wartman, Jef	EDEV N		[_] better	1.1 II						Cuantic	ן אוסואוסטע נייין
SIREET ADORESS	3805 SOUTH NI						ADDRESS					
CITY-ST-ZIP	VALRICO FL 33					ITY-S						
THTLE	D			DELETE	2.17		" L" -				Change	☐ Addition
NAME	ISHAK, SALAM	G			22 N	AME						
STREET ADDRESS	1117 SHIPWATO				2.3 \$	TREET	ADDRESS					
Cłty-St-ZIP	TAMPA FL 3360	2			240	OTY-S	ST-ZIP					
TITLE				☐ DELETE	31 T	TLE					Change	☐ Addition
NAME					32 N	AME						
STREET ADDRESS					33\$	TREET	ADDRESS					
CITY-ST-ZIP							ST-ZIP					
LILTE				☐ DELETE	4.1 T						☐ Change	Addition
NAME						AME	1					
STREET ADDRESS							ADDRESS					
City - St - ZIP				DELETE			T-ZIP			····	Change	Addition
TITLE				T'' DETELE	5.1 T		,				TH rusude	CT MODITION
NAME					5.2 N		ADDRESS					
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP TITLE				DELETE	5.4 C		IT-ZIP		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME				hand white the		IAME					breed withings	broad - respectively
STREET ADDRESS							ADDRESS					
CITY ST 74P							IT-ZIP					

SIGNATURE:

14. 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 13 if changed, or on an attachment with an address.