

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000019211 (8)

1. Corporation Name

J H S C CORPORATION



Principal Place of Business

2340 PERIWINKLE WAY
SUITE J3
SAMBEL ISLAND FL 33957

Mailing Address

2340 PERIWINKLE WAY
SUITE J3
SAMBEL ISLAND FL 33957

3. Date Incorporated or Qualified
03/09/1995

3a. Date of Last Report

4. FEI Number
65-0641559
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 c/o 501 E. Kennedy Blvd.

26 c/o 501 E. Kennedy Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 1700

27 Suite 1700

City & State

City & State

23 Tampa, FL

28 Tampa, FL

24 Zip 33602

25 Country USA

29 Zip 33602

30 Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RATLIFF, ROBERT L III
2340 PERIWINKLE WAY
SUITE J3
SAMBEL ISLAND FL 33957

81 Name
Richard A. Jacobson

82 Street Address (P.O. Box Number is Not Acceptable)
501 E. Kennedy Blvd., #1700

83

84 City
Tampa

FL

85 Zip Code
33602

11. Pursuant to the provisions of Sections 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of officer or director of registered agent and for applicable (NOTE: Registered Agent Signature required when transferring)

4/9/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSTD ☐ DELETE
NAME RATLIFF, ROBERT L III
STREET ADDRESS 2340 PERIWINKLE WAY, #J3
CITY-ST-ZIP SAMBEL ISLAND FL 33957

1.1 TITLE PSTD ☒ Change ☐ Addition
1.2 NAME Jurg Schweizer
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE Asst. Secretary ☐ Change ☒ Addition
2.2 NAME Richard A. Jacobson
2.3 STREET ADDRESS 501 E. Kennedy Boulevard, #1700
2.4 CITY-ST-ZIP Tampa, FL 33602

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
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.

SIGNATURE:

RICHARD JACOBSON

4/9/96

813 222 1159

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)