

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000022944 (9)

1. Corporation Name

J.E. INSTALLATION, INC.

Principal Place of Business

9565 CARLYLE AVE.
SURFSIDE FL 33154

Mailing Address

9565 CARLYLE AVE.
SURFSIDE FL 33154



3. Date Incorporated or Qualified

03/21/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CAHAN, RICHARD J. A
9565 CARLYLE AVE.
SURFSIDE FL 33154

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 typed or printed name of the registered agent and the corporation

Signature typed or printed name of the registered agent and the corporation

Signature typed or printed name of the registered agent and the corporation

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
JONES, EVAN
9565 CARLYLE AVE.
SURFSIDE FL 33154

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE NAME STREET ADDRESS CITY-ST-ZIP

2. TITLE NAME STREET ADDRESS CITY-ST-ZIP

3. TITLE NAME STREET ADDRESS CITY-ST-ZIP

4. TITLE NAME STREET ADDRESS CITY-ST-ZIP

5. TITLE NAME STREET ADDRESS CITY-ST-ZIP

6. TITLE NAME STREET ADDRESS CITY-ST-ZIP

7. TITLE NAME STREET ADDRESS CITY-ST-ZIP

8. TITLE NAME STREET ADDRESS CITY-ST-ZIP

9. TITLE NAME STREET ADDRESS CITY-ST-ZIP

10. TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. TITLE NAME STREET ADDRESS CITY-ST-ZIP

14. TITLE NAME STREET ADDRESS CITY-ST-ZIP

15. TITLE NAME STREET ADDRESS CITY-ST-ZIP

16. TITLE NAME STREET ADDRESS CITY-ST-ZIP

17. TITLE NAME STREET ADDRESS CITY-ST-ZIP

18. TITLE NAME STREET ADDRESS CITY-ST-ZIP

19. TITLE NAME STREET ADDRESS CITY-ST-ZIP

20. TITLE NAME STREET ADDRESS CITY-ST-ZIP

21. TITLE NAME STREET ADDRESS CITY-ST-ZIP

22. TITLE NAME STREET ADDRESS CITY-ST-ZIP

23. TITLE NAME STREET ADDRESS CITY-ST-ZIP

24. TITLE NAME STREET ADDRESS CITY-ST-ZIP

25. TITLE NAME STREET ADDRESS CITY-ST-ZIP

26. TITLE NAME STREET ADDRESS CITY-ST-ZIP

27. TITLE NAME STREET ADDRESS CITY-ST-ZIP

28. TITLE NAME STREET ADDRESS CITY-ST-ZIP

29. TITLE NAME STREET ADDRESS CITY-ST-ZIP

30. TITLE NAME STREET ADDRESS 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)(b), 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 registered or trusted 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 attached sheet with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EVAN W. JONES

300001850883
06/04/96-01163-0
***225.00

302 864 9233

CR2E034 (12/95)