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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Mar 06 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000030436 (6)

JFH ENTERPRISES, INC.

| Principal Place of Business                             |   |  |  |   |  |  |                                       |   |
|---|---|--|--|---|--|--|---------------------------------------|---|
| 103 23RD AVE<br>ST PETERSBURG BEACH FL 33706            |   |  | d ave<br>Ersburg bead                              | CH FL 33706-  | 4131   |  |                                       |   |
| U\$   |   | US   |  |   |  | 3. Date Incorporated or Qualified 04/14/1995   | 3a. Date of Last<br>07/15/1996        |   |
| 2. Principal Place of Business                          |   |  | 2a. Mailing Address                                |   |  | 4. FEI Number  | <del></del>                           | Applied For                             |
|   |   |  | 26   |   |  | <b>59-3308992</b>  |                                       | Not Applicable                          |
| Surte, Apt. #, etc.<br>2<br>City & State<br>3           |   |  | Suite. Apt. #, etc.                                |   |  | 5. Certificate of Status Desired Fee Requi   |                                       |   |
|   |   |  | & State  |   |  | 6. Election Campaign Financing   | \$5.0                                 | O May Be                                |
|   | Country   | 28   |  | 1 0-  |  | Trust Fund Contribution  |                                       | d to Fees                               |
| 25  | ]   | 29 Zip   | 29 30  |   |  | 8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No   |                                       |   |
|   | d Address of Curre  | nt Registered  | Agent  |   | 81 Name  | 10. Name and Address of New Re   | gistered Agent                        |   |
| JEANINE F   |   |  |  |   | 81 Name  |  |                                       |   |
| 23RD AVE<br>ETERSBURG                                   | BEACH FL 33706  |  |  |   | 82 Street Add  | dress (P.O. Box Number is Not Acceptab   | le)                                   |   |
|   |   |  |  |   | 83   |  |                                       |   |
|   |   |  |  |   | 84 City  |  | <b>—. 85</b> Zi                       | p Code                                  |
|   |   |  |  |   |  |  | FLIT                                  | •                                       |
| o the provision<br>agistered agent<br>in familiar with: | s of Sections 607 050<br>t, or both, in the State<br>and accept the oblig | J2 and 607.15<br>e of Florida   Si<br>ations of, Sec | i08, Florida St<br>lich change w<br>stion 607.0505 | atutes, the al<br>as authorize<br>i. Florida Stat   | bove-named cor<br>d by the corpora<br>utes.  | poration submits this statement for the p<br>ation's board of directors. I hereby accep  | urpose of changing of the appointment | its registered<br>as registered         |
|   | -   |  |  |   |  |  |                                       |   |
| Sturatori, typed or p                                   | orted ranie of registered age   |  | ·  |   | d Agent signature requ   | uired when reinstating)  | DATE                                  |   |
| PD  | OFFICERS AN   | D DIRECTOR   |  | 13.   |  | ADDITIONS/CHANGES TO OFFIC   |                                       |   |
| HAM, JEANI  | NC C  |  | DELETE   | 1.1 TI  |  |  | ∟ Change                              | e Addition                              |
| 103 23RD A  |   |  |  | 1.2 N/  |  |  |                                       |   |
|   | BURG BEACH FL   |  |  | 1   | REET ADDRESS   |  |                                       |   |
| OI I LILIIOL  | JOHO DENOTI LE  |  | DELETE   | 1.4 CI<br>2.1 TI  | TY-ST-ZiP  |  | Change                                | e Addition                              |
|   |   |  | La Descrit   | 2.1 N   |  |  | L charge                              | , L. Audition                           |
|   |   |  |  |   | REET ADDRESS   |  |                                       |   |
|   |   |  |  |   | ITY-ST-ZIP   |  |                                       |   |
|   |   |  | DELETE   | 3.1 Ti  |  | :  | Change                                | e                                       |
|   |   |  |  | 3.2 N/  |  |  |                                       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|   |   |  |  | 3.3 S1  | REET ADDRESS   |  |                                       |   |
|   |   |  |  |   | ITY-SI-ZIP   |  |                                       |   |
|   |   |  | DELETE   | 4.1 TI  |  |  | Change                                | Addition                                |
|   |   |  |  | 4.2 N   | AME  |  |                                       |   |
|   |   |  |  | 4.3 ST  | REET ADDRESS   |  |                                       |   |
|   |   |  |  | 4 4 Cł  | TY-ST-ZIP  |  |                                       |   |
|   |   |  | DELETE   | 5.1 TI  | TLE T  |  | ☐ Change                              | Addition                                |
|   |   |  |  | 5.2 N/  | IME  |  |                                       |   |
|   |   |  |  | 5 3 ST  | REET ADDRESS   |  |                                       |   |
|   |   |  |  | 5.4 CI  | TY-ST-7IP  |  |                                       |   |
|   |   |  | DELETE   | 6.1 10  | ILE  |  | Change                                | Addition                                |
|   |   |  |  | 6.2 N/  | IME  |  |                                       |   |
|   |   |  |  | 5.3 ST  | REET ADDRESS   |  |                                       |   |
|   | ·   |  |  |   | TY-ST-ZIP  |  |                                       |   |
| i indicated on t<br>ficer or orrector                   | this annual report or s   | supplemental<br>the receiver                         | ng does not q<br>annual report                     | 53 SI<br>54 CI<br>6.1 Tr<br>6.2 N/<br>6.3 SI<br>6.4 CI<br>ualify for the<br>is true and a | REET ADDRESS  IY-SI-7IP  LE  ME  REET ADDRESS  IY-SI-7IP  exemption state  exemption and tha | d in Section 119.07(3)(i), Ftorida Statutes<br>It my signature shall have the same legal<br>ort as required by Chapter 607, Ftorida St | Change                                | at t                                    |