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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000035834 (7)

JENCO, INC.

Principal Place of Business M

Mailing Address

## FILED May 02 1997 8:00am Secretary of State



12741 S.W. 68 TERR. MIAMI FL 33183				12741 S.W. 68 TERR. MIAMI FL 33183-2447							
							3. Date Incorporated or Qualified 05/08/1995	3a. Date of Last Report 04/23/1996			
2. Principal Place of Business				2a. Mailing Address				4. FEI Number		A	pplied For
21]				26				65-0581393		No	ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	θ		28	City & State			Election Campaign Financing     Trust Fund Contribution				
Zip 4	Country Z <sub>1</sub> p				Country 30			8. This corporation has liability for intangible tax under s. 199.032.  Florida Statutes			
	9. Name an	tered Agent				10. Name and Address of New Registered Agent					
THE		F LAWRENCE J		· · · · · · · · · · · · · · · · · · ·		81	Name		giotorou ri	,011.	
	ALMERIA AVI		01 10011	VIIII)							
	RAL GABLES					82	Street A	ddress (P.O. Box Number is Not Acceptab	ole) 		
						83	City	· · · · · · · · · · · · · · · · · · ·		or Zin	Code
						104	City		FL	<b>85</b> Zip	Code
SIGNATURE	Signature, typed or p	ninted name of registered			III Begiste <b>E 13</b>		ent signature re	gened when religial right ADDITIONS/CHANGES TO OFFIC	DATE CERS AND D	IBECTOE	RS IN 12
TITLE	PTD			DELETE		TITLE		ADDITIONS/OFFANGES TO OFFIC		Change	Addition
NAME	MCGRAW,	JENNIFER T			•	NAME	İ		L	T Allende	[
STREET ADDRESS	12741 S.W.						ADDRESS				
CITY-ST-ZIP	MIAMI FL 3	3183				CITY-S					
TITLE	SD			DELETE		TITLE				Change	Additio
NAME	MCGRAW, 1				22	NAME					
STREET ADDRESS	12741 S.W.				23	STACET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 3	3183			. 2	CHY-S	\$1 - 7IP				
TITLE				☐ DELETE	3 1	TITLE			Ĺ	Change	[_] Addition
NAME						NAME					
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NAME						NAME			L	_i Ghange	L_J AOUIIIOI
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP						CHY-S					
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CITY-ST-ZIP					5.4	CITY-S	1-ZIP				
TLE				DELETE	6.1	TITLE				Change	Addition
NAME					6.2	NAME					
STREET ADDRESS					6.3	STREET	ADDRESS				
CITY-ST-ZIP					6.4	CITY-S	1-7IP				
intormatio	n indicated on t	his annual report o	or supplemi	ontal annual report is:	true and	accu	rrate and th	led in Section 119.07(3)(i), Florida Statute nat my signature shall have the same lega port as required by Chapter 607, Florida S	Leffoot se if	made un	dor noth: the