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**PROFIT** CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

**FILED** 

May 23 1997 8:00am

Secretary of State

0467931

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P95000055348 (3)

J.P. MANAGEMENT GROUP, INC.  Principal Place of Business Mailing Address  3009 S.E. OVERBROOK DRIVE 9007 ST. LUCIE FL 34952-5710											
							3. Date Incorporated 07/18/1995	or Qualified		ate of Last I 22/1996	Report
2. Principal Pi	lace of Business		2a. Mailing	Address	·······		4. FEI Number				pplied For
1			26	<del></del>			59-3321431				ot Applicable
Suite, Apt	#, etc		( <del></del>	pt. #, etc			5. Certificate of Statu	us Desired	X		Additional leguired
City & State	0		27 City & S	State	<u></u>	<del>,</del>	6. Election Campaig	n Finenciaa			May Be
3			28				Trust Fund Contrib				to Fees
Zip	Co	untry	Zip		Count	ry	8. This corporation h	as liability for	intangible	e tax under	s. 199.032,
4	25		29		30		Florida Statutes		Yes	No	
	···	dress of Current	Registered Ac	gent		47	10. Name and Addre	as of New Re	gistered	Agent	
	WN, PATRICIA				8	1 Name					
	S.E. OVERBROC				8	2 Street Ad	dress (P.O. Box Number is	Not Acceptab	ole)		
MOK	IT ST. LUCIE FL 3	イサラビ			8	3	Marris - 175, 10 1015, 1, 10 107, 107, 107, 107	<del></del>		·	
					6	4 City			FL	<b>85</b> Zip	Code
11. Pursuant I	to the provisions of	Sections 607.0502	and 607.1508.	Florida Stati	utes, the abo	ve-named co	progration submits this state	ament for the p		of changing	its registered
							المستنب أبراها والمستراف والمستراء والمستراء أوالمستراء أوالما	I hereby acces	pt the ap	pointment a	s registered
office or re	egistered agent, or	both, in the State of	of Florida. Such	change was	S authorized Florida Statul	by the corpor	ration's board of directors.	,,			
	egistered agent, or m familiar with, and	both, in the State of accept the obligat	of Florida. Such tions of, Section	change was n 607.0505, F	lorida Statul	by the corpores.	orporation submits this state ration's board of directors.				
SIGNATURE	egistered agent, or m familiar with, and						quired when reinstating)		DATE		
SIGNATURE	Soj latore, typico or printed		and tille it applicable	e. (NC					DATE	D DIRECTO	RS IN 12
SIGNATURE	Seguatore hypodicir printed	name of registered agent OFFICERS AND	and tille it applicable		OTE Registered A	geni signalure rec	quired when reinstating)		DATE		RS IN 12
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