

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000058411 (6)

1. Corporation Name

JACORE INTERNATIONAL INC.



Principal Place of Business

15777 BOLESTA ROAD UNIT 59  
CLEARWATER FL 34620

Mailing Address

15777 BOLESTA ROAD UNIT 59  
CLEARWATER FL 34620

3. Date Incorporated or Qualified  
07/25/1995

3a. Date of Last Report

7/25/95

2. Principal Place of Business

2a. Mailing Address

21 4411 Bee Ridge Rd

26 4411 BEE RIDGE RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 442

27 442

City & State

City & State

23 SARASOTA, FL

28 SARASOTA FL

Zip

Country

Zip

Country

24 34233-2514

25 USA

29 34233-2514

30 USA

4. FEI Number

65-060-1841

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EVANS, STEPHEN W  
15777 BOLESTA ROAD UNIT 59  
CLEARWATER FL 34620

81 Name

EVANS, STEPHEN W

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

2400 FEATHER SOUND DR  
# 1034

83

84 City

CLEARWATER

FL

85 Zip Code

34622

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

*Stephen W. Evans*

STEPHEN W. EVANS - PRESIDENT & CEO

8/12/96

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSTD  
NAME EVANS, STEPHEN W  
STREET ADDRESS 15777 BOLESTA ROAD UNIT 59  
CITY-ST-ZIP CLEARWATER FL 34620

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE PSTD  
1.2 NAME EVANS, STEPHEN W.  
1.3 STREET ADDRESS 2400 FEATHER SOUND DR. # 1034  
1.4 CITY-ST-ZIP CLEARWATER, FL 34622

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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

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

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

6.1 TITLE  
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 unchanged, or on an attachment with an address.

SIGNATURE:

*Stephen W. Evans*

STEPHEN W. EVANS  
PRESIDENT & CEO

8/12/96

813-573-6092

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)