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PROFIT . CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # P95000084608 (5)

JRC INTERNATIONAL PRODUCTS, INC.

Principal Place of Business

Mailing Address

FILED Jun 09 1997 8:00am Secretary of State



MAITLAND FL		1846 COMANCHE TRAIL MAITLAND FL 32751-3822				
				3. Date Incorporated or Qualified 10/30/1995	04/18/	f Last Report
2. Principal P	lace of Business Commence TR.	2a. Mailing Address	and To	4. FEI Number 59-337	5983	Applied For
21) /640 Sulte, Apt.		26 /6 /6 Coma Suite, Apt. #, etc.	receic			Not Applicable 8.75 Additional
22	,, 000	27	releTh.	5. Certificate of Status Desired		Fee Required
City & State 23 MA	Hand, Fl.	City & State 28 MAifland,	FL	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip 327	75 25 USA	29 Zip 29 32751 30	Country		Yes 🗌 No	0
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Reg	istered Agen	ıt
SHE	PHÄRD, JEFFREY J SR.					
1846 COMANCHE TRAIL MAITLAND FL 32751			82 Street Address (P.O. Box Number is Not Acceptable)			
MAI	IDANU FL 32/51		63		, <u>.</u>	
			84 City			* Ziz Code
	1				FL 85	
11. Pursuant office or ragent. La	to the provisions of Sections 97,0502 egistered agent, or both, in the State of Infamiliar will, and soon the obliga	and 60 1,008, Florida Statutes, 1,0 1, Florida Such change was author ions /1, Section 607,0505, Florida S	above-named cor ized by the corpora statutes.	poration submits this statement for the pration's board of directors. I hereby accep	rpose of char the appoint	nging its registered nent as registered
SIGNATURE Signature, type Gro Fleet We of regulated the o						
12,			3.	ADDITIONS/CHANGES TO OFFIC		
TITLE	PID I I I I I I I I I I I I I I I I I I	<i>y</i> –	.1 TITLE			Change
NAME	SHEPHARD, JEFFREY J'SR. 1646 COMANCHE TRAIL		2 NAME			200
STREET ADDRESS	MAITLAND FL 32751		3 STREET ADDRESS) II
CITY-ST-ZIP TITLE	VSD		4 CITY - ST - ZIP		П	Change Addition
NAME	SHEPHARD, REBECCA R	_	2 NAME			
STREET ADDRESS	1646 COMANCHE TRAIL		3 STREET ADDRESS			
CITY-ST-ZIF	MATLAND FL 32751		4 CHY-ST-ZIP			
TITLE		☐ DELETE 3.	A TITLE			Change Addition
NAME			.2 NAME			
STREET ADDRESS			.3 STREET ADDRESS			
CITY-ST-ZIP			4 CITY-ST-ZIP			Change Addition
NAME			.2 NAME		، ب	Sugarge C Modition
STREET ADDRESS			3 STREET ADDRESS			
CITY-ST-ZIP			4 CITY-SI-ZIP			
TITLE		· · · · · · · · · · · · · · · · · · ·	1 TITLE			Change Addition
NAME		. 5.	.2 NAME			
STREET ADDRESS		5.	3 STREET ADDRESS			
CITY-ST-ZIP			4 CITY-ST-ZIP			
TITLE		•	.1 TITLE		<u> </u>	Change
NAME			2 NAME			
STREET ADDRESS			3 STREET ADDRESS			
CITY-ST-ZIP	by cartify that the information supplied		4 CITY-ST-ZIP	ed in Section 119.07/3/(i) Florida Statutes	I further ceri	tify that the

I do hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 118.07(3)(i), niorida 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 eath; that I am an officer or director of the corporation or the receiver 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 are on an example, in an address.