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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P950000847	785	(1)
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JBJ REFERRALS, INC.

Principal	Place	of	Business
T I I I I I I I I I I I I I I I I I I I		201	CONTO

Mailing Address



2000 SOUTH DIXIE HIGHWAY SUITE 200 MIAMI FL 33133	2000 SOUTH DIXIE HIG SUITE 200 MIAMI FL 33133	HWAY	3. Date incorporated or Qualified	3a. Date of	Last Report
			11/03/1995		
2. Principal Place of Business	2a. Mailing Address	S 11.0	4. FEI Number	For	Applied For
21 12627 50, DIXIC HWY	26 12677 So	, DIKE MWY	APPlied		Not Applicable
	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State 23 MIAMI, FL,	City & State 28 MIAM	FL	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
1ZIP Country 24 33156 25 DADE	Zip	Country	8. This corporation has liability for in		inder's 199.032,
24 35136 25 DATE:	29 33156	30 DAD	Florida Statutes Yes 10. Name and Address of New Ro	- •	
5. Name and Address of Current In	edistered whent	81 Name	10. Name and Address of New No	Sylatereu Ay	BIIL
LITHAGE NICAL O					
LITMAN, NEAL S		82 Street Ad	dress (P.O. Box Number is Not Acceptable	Θ)	
2000 SOUTH DIXIE HIGHWAY		83			
SUITE 200		83			
MIAMI FL 33133		84 City		<u></u>	85 Zip Code
Pursuant to the provisions of Sections 607.0502 and or registered agent, or both, in the State of Florida. S	d 607.1508, Florida Statute	s, the above-named corp	oration submits this statement for the purp	ose of chang	ing its registered office
familiar with, and accept the obligations of, Section (607.0505, Florda Statutes.	o by the corporation's be	rend of directors. Frieldby accept the appo	intriient as rej	gistered agent. Fam
SIGNATURE Signature, typed or printed name of registered against and to	the if act is as as (NOT	E. Registered Agent signature regi	med when of its Latina	DAIL	
12. OFFICERS AND DI		13.	ADDITIONS/CHANGES TO OFFIC		RECTORS IN 12
TITLE D	DEVETE	1 1 TITLE			Change Addition
NAME BAKER, JEANNE M		1.2 NAME			
STREET ADDRESS 12677 SOUTH DIXIE HIGHWAY		13 STREET ADDRESS			
CITY-ST-ZIP MIAMI FL 33156		1.4 CITY - S3 - ZIP			
TOLE	☐ DELETE	2 1 THUE			Change Addition
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP		2.4 CITY - ST - ZIP			
TITLE	☐ DELETE	3 1 DILE			Change Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3. STREET ADDRESS			
City-SI-ZIP		3.4 CiTY - S1 - ZiP			
TITLE	□ DELETE	4 1 TITLE			Change 🔲 Addition
NAME		4 2 NAME			
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CITY-ST-ZIP		4.4 CITY - ST - ZIP	4 000001 7:5 	ا ا	4
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NAME		5.2 NAME	***200.00		
STREET ADDRESS		5 3 STREET ADDRESS			
CITY-ST-ZIP		5 4 CITY-ST-ZIP	·		
TITLE	DELETE	6 1 TITLE			Change 🗀 Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CiTY - ST - ZIP		6 4 CITY - ST - ZIP			

roo heavy carriy that the information indicated on this 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 if charged, or on an attachment with an address.

SIGNATURE: