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

Mailing Address

2816 SOUTH ELSTON DRIVE

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

246 N WESTMONTE DR

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 24 1997 8:00am

Secretary of State

Daytime Phone #

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000089704 (7)

S&J ENTERPRISES OF ORLANDO, INC.

SUITE 107	DOUBLES OF BOTH	DELTONA FL 32738-1640			
US	PRINGS FL 32714			Date Incorporated or Qualified     11/22/1995	3a. Date of Last Report 05/01/1996
2. Principal P	lace of Business	2a. Mailing Address	Image De	4. FEI Number	Applied For
21		26 246 N. West Suite, Apt. #, etc.	MOTHE LY.	59-3360060	Not Applicable
Suite, Apt	#, etc	Ste 107		Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 Altamonte	Springs F	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032,
24	25	29 03714 3	o U.S.	Florida Statutes	Yes No
<b></b> .	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	GRODER, PATRICK J		81 Name	Padrick J Migre	oder .
2816 SOUTH ELSTON DRIVE			82 Street Address (P.Q. Box Number is Not Acceptable)		
DEL	TONA FL 32738		83	e N. Westmonte Dr	· our ror
			84 City	amonte Springo	FL   85   35 COO 1/2
11. Pursuant	to the provisions of Sections 607,050	2 and 607,1508, Florida Statutes	the shove-named	corporation submits this statement for the n	purpose of changing its registered
office or u	registered agent, or both, in the State	of Florida, Such change was autors of Section 607,0505, Florida	thorized by the corp de Statutes	oration's board of directors. I hereby accep	at the appointment as registered
	and tellificate with the design	111//	ou outstoo.	4	1-18-97
SIGNATURE	Signature, typed or printed name of yigh terral age	ni and title if applicable (NOTE: I	Registered Agent signature		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
THEF	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	MCGRODER, PATRICK J		1.2 NAME	955 Silverton Loc	~C
STREET ADDRESS	2816 SOUTH ELSTON DRIVE			Lake Mary, FL 3	
CHTY - ST - ZIP THLE	DELTONA FL 32738	DELETE	1.4 CITY+ST-ZIP 2.1 TITLE	Lary Hury, FC C	Change Addition
NAME	MCGRODER, CHRISTINE A			DEG S. Weston Lor	
STREET ADDRESS	2816 SOUTH ELSTON DRIVE		23 STREET ADDRESS	955 Silverton Loc Lake Mary, FL 32	<b>T</b>
CITY - ST - ZIP	DELTONA FL 32738		2 4 CITY-ST-ZiP	Lake Mary, FL 32.	746
THLE	DEFINITION OF THE PROPERTY OF	☐ DELETE	3 1 TITLE		Change Addition
NAME.		•	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		•
CITY - ST - 70P			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
Till E		L) otter	5.1 ITTLE 5.2 NAME		C Grange C Francis
NAME PROFES ADDRESSES			5.3 STREET ADDRESS		
STREET ADDRESS  CITY-ST-ZIP			5.4 CITY-ST-ZIP		
1011-31-21r		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CIFY - ST - ZIP			6.4 CITY-ST-ZIP		
14 Laio here	by certify that the information supplied	d with this filing does not qualify	for the exemption s	tated in Section 119.07(3)(i), Florida Statute that my signature shall have the same legs	s. I further certify that the
l am an d	officer or director of the corporation or	the receiver or trustee empower	red to execute this r	report as required by Chapter 607, Florida S	Statutes; and that my name
appears	in Block 12 or Block 13 if changed, or	r on an attachment with an addre	ess.		