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

PROFIT CORPORATION ANNUAL REPORT

1997

980 TYRONE BLVD.

ST. PETERSBURG FL 33710



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000004023 (3)

RESIDENT AGENT CORPORATION OF PINELLAS CTY

JANG, INC.

Principal Place of Business Mailing Address 756 79TH CIR., SOUTH 756 79TH CIR., SOUTH ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33707-1046 3. Date Incorporated or Qualified 3a. Date of Last Report 01/11/1996 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 Crty & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent

Zip Code 3370 RSBURG 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 office or registered office or registered agent. Lam familial with, analyzed by the obligations of, Section 607.0505, Florida Statutes.

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

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SIGNATURE	Hook Cluvery				1-21-9 DATE	<u></u>
12.	Signature speed or product name of registered accordance of others. OFFICERS AND DIRECT		legislered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	0	DELETE	1.1 TITLE	ADDITIONO/OTRACES TO OTT OF	Change	Addition
	SLOTT, GENE	C) Section	l -		L Cridings	
NAME	13000 FARMINGTON TRAIL		1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS			
CITY - ST - ZIP	SEMINOLE FL 34646	DELETE	1.4 CITY - ST - ZIP		Channa	Addition
TITLE	D	L DECEIE	2.1 TITLE		Change	LL Addition
NAME	KLEINMETZ, JULE		2.2 NAME			
STREET ADDRESS	756 - 79TH CIRCLE SO.		2.3 STREET ADDRESS			
CITY - ST - ZIP	ST. PETERSBURG FL 33707		2 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY - ST - ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - S1 - ZIP			44 CITY - ST - ZIP			
TITLE		DELETE	51 TITLE		Change	Addition
NAME			52 NAME			
STREET ADDRESS			53 STREET ADDRESS			
CITY - SI - ZIP			5.4 CITY-ST-ZIP			
THILE		DELETE	61 TITLE		☐ Change	Addition
NAME			62 NAME			
STHEET ADDRESS			6 3 STREET ADDRESS			
CITY-S1-ZIP			64 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed

SIGNATURE:

FILED

Jan 28 1997 8:00am

Secretary of State

Applied For Not Applicable

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