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Aug 20 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000010460 (9)

1. Corporation Name
JENNIFER'S ARTS IN MOTION, INC.



Principal Place of Business: 880 STATE ROAD A1A STE 3, PONTE VEDRA BEACH FL 32082
Mailing Address: 880 STATE ROAD A1A STE 3, PONTE VEDRA BEACH FL 32082-3214

3. Date Incorporated or Qualified: 01/29/1996
3a. Date of Last Report: Initial Return

2. Principal Place of Business
2a. Mailing Address

4. FEI Number: 59-3363713
Applied For: Not Applicable

21 Suite, Apt. #, etc.
26 Suite, Apt. #, etc.

5. Certificate of Status Desired: \$8.75 Additional Fee Required

22 City & State
27 City & State

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

23 Zip Country
28 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

24 Zip Country
25 Zip Country
29 Zip Country
30 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROBERTS, JENNIFER J
880 STATE ROAD A1A STE 3
PONTE VEDRA BEACH FL 32082

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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: X Jennifer Jager Roberts President DATE: 8/14/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: PTD
NAME: ROBERTS, JENNIFER J
STREET ADDRESS: 880 STATE ROAD A1A STE 3
CITY-ST-ZIP: PONTE VEDRA BEACH FL 32082

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE: VSD
NAME: ROBERTS, DAVIS M
STREET ADDRESS: 880 STATE ROAD A1A STE 3
CITY-ST-ZIP: PONTE VEDRA BEACH FL 32082

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

TITLE: DELETE

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

TITLE: DELETE

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

TITLE: DELETE

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

TITLE: DELETE

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 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, or on an attachment with an address.

SIGNATURE: Jennifer Jager Roberts 8/14/97 (904) 273-4463

CR2E034 (9/96)