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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000015322 (6)

JUPITER CHARTERS, INC.

852 FRANKLIN RD	352 FRANKLIN RD	
Principal Place of Business	Mailing Address	

FILED Apr 29 1997 8:00am Secretary of State



Lusiciba	SI FIACE OF DUSINGS	5	IV	naming Address				
	NNKLIN RD ITA FL 33469			52 FRANKLIN RD EQUESTA FL 33469-1	3011			
								3. Date Incorporated or Qualified 3a. Date of Last Report 02/15/1996
2. Princ	cipal Place of Busir	ness	2a	. Mailing Address				4. FEI Number Applied For
21			26					65-0644373 Not Applicable
22	Suite, Apt. #, etc. Suite, Apt. #, etc. 2 27					5. Certificate of Status Desired S8.75 Additional Fee Required		
City	& State		28]	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24		Country 25	29	Zip	30]	ountry		8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No
	9. Name	and Address of Current	Regi	stered Agent				10. Name and Address of New Registered Agent
ì	BASS, DONALI					81	Name	e
	7166 SE OSPR HOBE SOUND	PEY ST FL 33455				82	Street A	et Address (P.O. Box Number is Not Acceptable)
						83		
						84	City	FL 85 Zip Code
11. Pur offic age SIGNAT	ent. I am familiar wi fURE	ions of Sections 607,0502 jont, or both, in the State in the and accept the obligation or printed name of registered ager	tions o	of, Section 607.0505	5, Florida Si	alutes	S.	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered under equired when reinstating) DATE
12.		OFFICERS AND	DIRE	CTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			DELETE	1.1	THILE		Change Addition
NAME	HITCH, B				1.2	NAME		
STREET AD		nkun RD			1.3	STREET	ADDRESS	s (
CITY-ST-		TA FL 33469				CITY - S	I - ZIP	
TITLE	D	AL CUDICTURE		∐ DEL€TE	2.1	TITLE		Change Addition
NAME		N, CHRISTINE M				NAME		
STREET AD	TEAUEA	NKLIN RD Ta fl 33469					ADDRESS	\$
CITY-ST-2	ZIP TEGOLO	IN 1. 03409		DELETE		TITLE	51 - ZIP	Change Addition
NAME						NAME		
STREET AD	DORESS				1		ADDRESS	s
CITY-ST-	ZIP				3.4	CITY-	S1- <i>Z</i> (F	
TITLE				☐ DELFTE	4.1	TITLE		Change Addition
NAME					4.2	NAME		
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NAME STREET AD	nocce				- 6	NAME	ADDRESS	c į
STREET AD								S
CITY-ST-2		I the information punction	Lazith 6	thin filing door not o		CITY-S		e stated in Section 119 07/3/(/) Florida Statutes I further cortify 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 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.