## 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 # P96000025779 (5)

FJ ASS	OCIATES, INC.				1
•		Mailing Address	PAN (P	- I Marines in agus anai arin agus agus agus	i sanis inaki binji 1904, iastis 1811 1881
427 SOUTH NEW YORK AVENUE 427 SOUTH NEW YORK AVE WINTER PARK FL 32789 WINTER PARK FL 32789-427				E	
				3. Date Incorporated or Qualified 03/18/1996	3a. Date of Last Report
<b>-</b> ′	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apr	# 616	Suite, Apt. #, etc.		59-3370893	Not Applicable  58.75 Additional
22		27	27		Fee Required
City & State		City & State	City & State		\$5.00 May Be
23		28			Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes No
24	25   9. Name and Address of Curre	29 [3 nt Registered Agent	90	Florida Statutes  10. Name and Address of New Re	
ROHR, JAY 427 SOUTH NEW YORK AVENUE WINTER PARK FL 32789  81 Name ROBERT P SALTSMAN  82 Street Address (P.O. Box Number is Not Acceptable) 22 W. Com STACK Suite 210  83  84 Gity					
			" Winn	mer Park	FL 85 32789
11. Pursuant office or agent La	registered agent, or both, in the Stat am familiar with and account the oblig by Salva W	e of Florida Such change was au gations of, Section 607.0505, Flori	ithorized by the corpora ida Statutes.	poration submits this statement for the p tion's board of directors. I hereby accep	burpose of changing its registered of the appointment as registered 3/15/97
12.	Signature, typed or printed name of registered ag OFFICERS AT	jent and title if applicable INGTE:  ND DIRECTORS	Registered Agent signature requi	red when reinstaling)  ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ROHR, JAY		1,2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY S1-7IP	WINTER PARK FL 32789	1 Drift	1.4 CITY-ST-ZIP		Change Addition
TITLE	ROHR, JAY 427 South New YOL	S □ DELETE	21 TITLE ;		Change Addition
NAME STREET ADORESS	427 SOUTH NEW YOL	K AVE	2.3 STREET ADDRESS		
CHTY-ST ZIP	Winter PARK, Fl.	32789	2. 4 CITY-ST-ZIP		
Trite		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - S1 - ZIP		☐ DELETE	34 CITY-ST-ZIP		Change Addition
TITLE NAME		ן ענונינ	4.1 TITLE 4 2 NAME		Througe Theoritain
STREET ADDRESS			4.3 STREET ADDRESS		
CITY: ST-ZIF			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.9 STREET ADDRESS		ļ
CITY - ST - Zif*			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	90000212	Change Addition
NAME			62 NAME	-03/26/97010	)2048
STREET ADDRESS			6.3 STREET ADDRESS	<u> </u>	

SIGNATURE:

CI1Y-\$1-2IP

SHATUFE AND VPEDER PRINTED NAME OF BIGNING OFFICER OF DIRECTOR

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 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 national contents of the corporation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my national contents of the corporation of the corporation of the corporation of the corporation.

2/17/97

407-629-606 Daytime Phone

**FILED** 

Mar 25 1997 8:00am

Secretary of State

ACTUAL A