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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000029729.(6)

FILED May 02 1997 8:00am Secretary of State

JUST BECAUSE, INC. Principal Place of Business 61 LAWN STREET OVIEDO FL 32765 Address OVIEDO FL 32765										
							orporated or Qualified	3a. D	ate of Last F	Report
2. Principal Pla	ace of Business	2a. Mailir	ng Address			03/29/ 4. FEI Num			I A	oplied For
21		26	3				3369913		 	ot Applicable
Suite, Apt. #, etc.		Suite	Suite, Apt. #, etc.				te of Status Desired		\$8.75	Additional equired
City & State			State		·	6. Election	Campaign Financing	***************************************	\$5.00	May Be
3		28					nd Contribution	□		to Fees
Zip [4]	Country 25	Zip		Countr 30	ry	8. This corp	ooration has liability for statutes	intangible Yes		199.032,
	9. Name and Address of	Current Registered	Agent			10. Name a	nd Address of New Re	egistered	Agent	
PHILL	LIPS, EDWARD C			81	1 Name					
	AWN STREET DO FL 32765			8:	1	Address (P.O. Box f	Number is Not Accepta	ble)		
				84	1 1			FL	_ ' '	Code
office or re	o the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the	e State of Florida. Su	io, riorkia Stati	ites, the abo	ve-nameu	corporation submits	ires statement for the p	purpose c	r changing i	is registered
SIGNATURE				5	11	C KEH	lirectors. I hereby acce			397
SIGNATURE	Signature, typical or printed name of regis		able (NC	5	11	e required when reinstally) ADDITION	NS/CHANGES TO OFFI	APR DATE	26 , 19	997
SIGNATURE 5	Signature, typical or printed name of regis	tered agent and title if applica	able (NC	TE Registered A	gent signature	e required when reinstains) ADDITION PRESIDEN	IS/CHANGES TO OFFI	APR DATE	26 , 19	797 RS IN 12
SIGNATURE S	Signature, typical or printed name of regis	tered agent and title if applica	able (NC	TE Registered A	gent signature	ADDITION PRESIDENT ADDITION	NSICHANGES TO OFFI	DATE CERS AN	26 , 19 D DIRECTOR	797 RS IN 12
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4. I de 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 26, 1997 (407) 355