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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra@. Mortifam

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000029736 (1)

J & J IMAGES, INCORPORATED

Principal Place of Business

POST OFFICE BOX 585 WINDERMERE FL 34786-0585 Mailing Address

POST OFFICE BOX 585 WINDERMERE FL 34786-0585 FILED

97 OCT 16 AM 11: 32

3. Date Incorporated or Qualified

03/28/1996

SECRETARY OF STATE	
TALLAHASSEE, FLORIDA	
A CORCEURA DUR LIGUA BUCIU DOURE ROCKU ERCIO A	BURN ROBUN KORIO KRANDA UKRU BURK ING K
TALLAHASSEE, FLORIDA	

3a. Date of Last Report

2. Principal P	Place of Business	2a. Mailing Address	a. Mailing Address			4. FEt Number	A	pplied For	
21	26					59-3370677	Not Applicable		
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & Stat					6. Election Campaign Financing \$5.00 May Bo Trust Fund Contribution Land Added to Fees				
Zip	Country	Z(p)	Countr	 V	8. This corporation has liability for intangible tax under s. 199.032,				
 			30	Florida Statutes Yes X No					
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
moon, oncorr				Name					
5032 BUTLER RIDGE DRIVE			82	2 Street Address (P.O. Box Number is Not Acceptable)					
WINDERMERE FL 34788									
			83	1					
V			84	City		FI	85 Zip	Code	
11 Purcupat	to the provisions of Socions 607 0502	and £07 1£08 Harida State	utor the pho)	d corpo		d changing i	ite rouielorod	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Horida 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. Fa	am familiar with, and accept the obligat	ions of, Section 607.0505, F	lorida Statute	\$.					
SIGNATURE	Signature, typed or printed name of registered agent	and title at equalication (NC	11 Begistered Ar	ent singati	no require	d where reinstating) DATE			
12.	OFFICERS AND		13.		- Indiane	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12	
TITLE	PD	☐ DELĒTE	1.1 1014		1		Change	Addition	
NAME	MOCK, JASON H		1.2 NAME			000000%3%25	ÖŠO:		
STREET ADDRESS	DRESS 5032 BUTLER RIDGE DRIVE			-10/20/9701176					
CITY-ST-ZIP	WINDERMERE FL 34786		1.4 CITY -	S1 - 2 (P		****558.00	非非非第55	50 . 00	
TITLE	VD	DELFTE	2.1 TillE		1		Change	Addition	
NAME ,	ZINN, GERALD A		2.2 NAME						
STREET ADDRESS	24828 VANBUREN STREET		23 STRFF	T ADDRESS	; (•		ļ	
CITY-ST-ZIP*	ASTATULA FL 34705		2. 4 CITY-	S1 - ZIP					
TITLE	ST	☐ DELETE	3.1 THE				Change	Addition	
NAME	MOCK, GENNETTE		3.2 NAME		. سد			{	
STREET ADDRESS	C/O POST OFFICE BOX 585		3.3 STREE	t adoress		032 BUTLER RIDGE DR.			
CITY-ST-ZIP	WINDERMERE FL 34786-0585		3.4. CITY-	ST-ZIP	$ \omega $	INDERMERE, FL 34786			
TITLE		☐ DETEIF	4.1 THILE		-		Change	Addition	
NAME	1		4. 2 NAME						
STREET ADDRESS				i address	}				
CITY-S1-ZIP		DELETE.	4.4 CITY-	\$1-ZIP	-		Change	Addition	
TITLE		□ Detet	5.1 TITLE				C cuange	Addition	
NAME Proces aborese			5.2 NAME 5.3 STRFE	LADDOSOS	.				
STREET ADDRESS			1		'			-	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 6.1 TITLE	51 - Z(P)	+		Change	Addition	
NAME			6.2 NAME		}		7/1		
STREET ADDRESS				ADDRESS			~ [] [
CITY, CT. 7IP			64007	ST - 71P	i	f_{Σ}	AV		
14. I do here	by certify that the information supplied	with this filing does not qua	lify for the ex	emption	stated	in Section 119.07(3)(i), Florida Statutes. I furing	r corlly that	l the	
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 trusted empeyored 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 away inchment with an address.									