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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600034060 (9)

LAND-JET, INC.

Principal Place of Business

Mailing Address

FILED Mar 21 1997 8:00am Secretary of State



miliopal made of outliness	Mailing A	duress						
5428 SHELL ROAD LAND O'LAKES FL 34639	5429 SHEI Land o'l	ll road Akes FL 34639-3:	341					
					3. Date Incorporated or Qualified	3a. Da	te of Las	st Report
					04/15/1996			
2. Principal Place of Business		g Address			4. FEI Number			Applied For
5115 W. Kno					59-3381785			Not Applicab
Suite, Apt. #, etc.	Suite,	Apt #, etc.			5. Certificate of Status Desired		., .	5 Additional Required
City & State Tampa, Fe.	City & 28	State			Election Campaign Financing Trust Fund Contribution			00 May Be led to Fees
- 1.7 ··· - 1 · · · · · · · · · · · · · · · ·	ountry Zip		Country	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for			
B3654 25	HI Sparry 29		30				No	
g, Name and a	Address of Curren Registered	Agent			10. Name and Address of New Re	gistered A	gent	
ANTONIO, JANINE A	_		81	Name				
5429 SHELL ROAD				Street Add	ddress (P.O. Box Number is Not Acceptable)			
LAND O'LAKES FL	34639		83					
			84	City			85 2	ip Code
			04	Ony		FL	63 2	up code
8 g i t n - tyri d organi 2.	OFFICERS AND DIRECTORS		Registered Age	nt signature requ	ired when reinslating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND		
nt D		DELETE	1.1 TITLE				Chan	ge 🛄 Additi
M GILCHRIST, G			1.2 NAME					
PLET ADDRESS 870 19TH AVE	NUE NORTH		1.3 STREET	ADDRESS				
IN-ST ZIF ST. PETERSBI	JRG FL 33704		1.4 CITY - 5	T - ZIP				
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ME ANTONIO, JAI			2.2 NAME					
REFLADORESS 5429 SHELL F			23 STREFT	ADDRESS				
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VE ANTONIO, STI RELEADDRESS 5429 SHELL F			3.2 NAME 3.3 STREET	ADDECC				
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17-St 76			5.4 CITY - S	T- 21P				
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THE LADDRESS			63 STREET	ADDRESS				
0¥-ST-ZP			64 CITY-5	T - 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 armual report of 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

JAMING THOMS

I SIGNATURE AND TYPED ON PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/18/97 813-243.8636