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 # 1. Corporation Name P96000038379 (9)

THE JU	ipiter rose corporatio)N			
Principal Plac	e of Business	Mailing Address			KARI TOYDO KININ HODIN CANY TODA
4300 SOUTH U.S. HIGHWAY ONE SUITES 203-233 JUPITER FL 33477		4300 South U.S. Highway Suites 203-233 Jupiter Fl 33477-1124	ONE		
				3. Date Incorporated or Qualified 3a. 04/29/1996	Date of Last Report
2. Principal F	Place of Business	2a. Mailing Address		4. FFt Number	Applied For
21		26	T	65-0468865	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & Stat	10	City & State			Fee Required
23	ie	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for intangib	
24	25	29	80	Florida Statutes	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registers	d Agent
STU	URR, CHRISTOPHER		81 Name		
	00 SOUTH U.S. HIGHWAY ONE		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SUITES 203-233 JUPITER FL 33477			83		
	TILITE OOTT		84 City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code
44 D				F	L.
	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida Such change was au gations of, Section 607.0505, Flor	thorized by the corporal ida Statutes.	coration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE	Signature, typed or printed harne of registered ag-	gent and title if applicable. (NOTE:	Registered Agent signature regul	red when reinstating) DATE	
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
THLE	PSVT	DELETE	1.1 TITLE		Change Addition
NAME	STURR, CHRISTOPHER	ALIM 2444 444	1.2 NAME		
STREET ADDRESS	4300 SOUTH U.S. HIGHWAY	UNE #203-233	1.3 STREET ADDRESS		
CHY-ST-ZIP	JUPITER FL 33477	DELETE	1.4 City-\$1-ZIP		Change Addition
NAME	D Sturr, Christopher	C) beerie	2.2 NAME		Em charge Em receiver
STREET ADDRESS			2.3 STREET ADDRESS		
CHY-S1-ZIP	JUPITER FL 33477		2. 4 CITY - \$1 - ZIP		
TILLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	\		33 STREET ADORESS		
CHY-ST-70°	ļ	T brietr	3.4. CITY-ST-ZIP		Change Addition
THE	1	DELETE	4.1 TITLE		Ci custific Ci vocition
NAME SINSET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-ST-ZiP		
Titch		☐ DELETE	5.1 TITLE	······································	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		

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 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

SIGNATURE:

appears in Block 12 or Block 13

FILED

May 09 1997 8:00am

Secretary of State

Daytime Phone #