## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



## FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000041397 (6)

JFC AUTOMATION, INC.

Principal Place of Business

Mailing Address

## FILED Aug 07 1997 8:00am Secretary of State



3688 CYPRESS LAKE DR LAKE WORTH FL 33467			3668 CYPRESS LAKE DR LAKE WORTH FL 33467						
						3. Date Incorporated or Qualified 05/09/1996		SPACE ate of Last L	t Report
2. Principal Pl	28. Mailing Address				4. FEI Number	1 10 7	<del></del>	Applied For	
21		26	26			65-0675164			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				В		Additional
22		27	27			5. Certificate of Status Desired	ப		Required
City & State		City & State				Election Campaign Financing     Trust Fund Contribution			May Be
Zip 24	Country 25	Zip <b>29</b>	Count <b>30</b>			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
9. Name and Address of Current Registered Agent						10. Name and Address of New Re			
CA			81	Name					
	B8 CYPRESS LAKE DR KE WORTH FL 33467			82	Street Ad	dress (P.O. Box Number is Not Acceptab	10)		
				83			•		
		•		84	City		FL	85 Zij	p Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, it office or registered agent, or both, in the State of Florida, Such change was author					the corpor	orporation submits this statement for the p		changing	its registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE							····		
Signalure, typed or prelied name of registered agent and title if applicable (NOTE:  12. OFFICERS AND DIRECTORS				d Ago	nt signature rec	quired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE -	DIDECTO	3DC IN 12
TITLE	0	DELETE	13.	ITL F		ADDITIONS/OFFICE TO OFFICE	CHO AND	Change	
NAME	CAUDRILLIER, FRANCOIS	<del></del> ··· ·-	1.2 N/		ľ	·		C. C.A.Igo	7,000,1001
STREET ADDRESS	3668 CYPRESS LAKE DR				ADDRESS				
CITY-ST-ZIP	LAKE WORTH FL 33467			ITY-ST					
TITLE		☐ DELETE	2.1 Tí					Change	Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 ST	TREET A	ADDRESS		1		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		T- ZIP				
TITLE	☐ DELETE			TŁE				Change	Addition
NAME			3.2 N/	AME					
STREET ADDRESS			3.3 ST	TREET	ADDRESS				ļ
CITY-ST-ZIP			3.4. C	HY-S	T-ZIP				
TITLE		DELETE	4.1 TI	TLE				☐ Change	Addition
NAME			4.2 N	IAME	İ				
STREET ADDRESS			4.3 ST	TREET A	ADDRESS				1
City-St-ZIP			4.4 Ci	TY-ST	- ZIP				
TITLE		DELETE	5.1 TO	1LE				Change	Addition
NAME			5.2 NA	AME					
STREET ADDRESS			5.3 \$1	REET /	ADDRESS				
CITY-ST-21P			5.4 CI	TY-ST	- ZIP				
TITLE		DELETE	6.1 T/I	TLE				☐ Change	Addition
NAME			6.2 NA	<b>IME</b>	1				
STREET ADDRESS			6.3 ST	REET A	ADDRESS				
CITY-ST-ZIP			6.4 CI	TY-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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.