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

PROFIT CORPORATION **ANNUAL REPORT**

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000047840 (9)

JUST SWINGIN, INC.

FILED Jun 11 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address		F 10 844 8 8 1 1 1 4 1 4 1 4 1 1 1 1 1 1 1 1	F (BRISE i ick id:10 Bitti datti Batti antii antii disit idda janti disit datti datti		
1715 NORTHEAST 51 STREET FORT LAUDERDALE FL 33334		POST OFFICE BOX 896 DEERFIELD BEACH FL 33443-0896					
				3. Date Incorporated or Qualified 06/05/1996	3a. Date of Last	Report	
	lace of Business	2a. Mailing Address		4. FE! Number		Applied For	
1 234				65-06725	53	Not Applicable	
Suite, Apt.	· ·	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1 ,	Additional	
City & State		City & State		6. Election Campaign Financing		Bequired	
الصحت	1/2T23 1 1	28		Trust Fund Contribution		O May Be d to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under	s. 199.032,	
1 534 :		29	30		Yes No	······································	
	9. Name and Address of Current R	agistered Agent	81 Name	10. Name and Address of New R	gistered Agent		
	ERILAWYER CHARTERED			Kal Branson			
343 ALMERIA AVENUE			82 Street A	82 Street Address (P.O. Box Number is Not Acceptable)			
GUI	RAL GABLES FL 33134		83	3717 Shelling	10017		
			A				
			84 0430	ca Ration	FL 85 3	3437	
11. Pursuant	to the provisions of Sections 607.0502 a	nd 607.1508, Florida Statut	es, the above-named a	cornoration submits this statement for the	purpose of changing	its registered	
office or re agent. I a	egistered agent, or both, in the State of I in familiar with, and ascept the obligatio	-lorida. Such change was a ns of, Section 607.0505, Fir	authorized by the corp orida Statutes.	oration's board of directors. I hereby acce	pt the appointment a	s registered	
SIGNATURE	2001 /12						
	Signature, typed or printed name of registered agent ar		L Registered Agent signature r	<u> </u>	DATE CLOSE OF C	DC IN 40	
ITLE	OFFICERS AND D	DELETE	13.	ADDITIONS/CHANGES TO OFFI	Change		
IAME	BRANSON, KAL R	La decer	1.2 NAME	Kal Branson	_		
STREET ADDRESS	1715 NORTHEAST 51 STREET		1.3 STREET ADDRESS	2.3444 Shetland	Kun		
CITY-ST-ZIP	FORT LAUDERDALE FL 33334		1.4 CITY-ST-ZIP	Boca Raton, FL	33433		
TITLE	VŠD	DELETE	21 TITLE	NS D ',	Change	Addition	
NAME .	MILLER, ANDREA		2 2 NAME	Andrea Mille			
STREET ADDRESS	1715 NORTHEAST 51 STREET		2.3 STREET ADDRESS	12900 SW 13 St #	76 30 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	- Devere	2.4 CITY - ST- ZIP	tembroke rino,	7 3308 1	——————————————————————————————————————	
TITLE		DELETE	3.1 TITLE		Change	Addition	
NAME STREET ADODESS			3.2 NAME 3.3 STREET ADDRESS				
STREET ADDRESS City-St-Zip			3.4 CHY-SI-ZIP				
TITLE		DELETE	4.1 TITLE		Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY - ST - ZIP				
TITLE		DELETE	5.1 THTLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP	•-	-1	5.4 CITY-ST-ZIP		—		
TITLE		DELETE	6.1 TITLE		∐ Change	Addition	
NAME		1	62 NAME				
STREET ADDRESS		1	63 STREET ADDRESS				
CITY-ST-ZIP	nu postific that the information areas		6 4 CHY-ST-ZIP	stad in Costion \$10.07/2\/0). Fleside Design	on I further a wife the	at the	
information	by certify that the information suppling in indicated on this annual report (fficer or director of the corporation of the corp	port is to	rue and accurate and rered to execute this re	ated in Section 119.07(3)(i), Florida Statut that my signature shall have the same leg port as required by Chapter 607, Florida	al effect as if made u	inder oath; that	