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appears in Block 12 or Block 13 if change

**SIGNATURE** 

## Jun 02 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 1997 1000 DIVISION OF CORPORATIONS DOCUMENT # P.96000047840 Just Swingin Inc Principal Place of Business Mailing Address 23444 Shetland Run POBOX896 Boca Raton, FL 33433 Deenfield Beach, FL 33443-0896 3. Date incorporated or Qualified 3a. Date of Last Report 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For <u>65-0672553</u> 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zio Country Ζip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Kal Branson 23444 Shetland Run Street Address (P.O. Box Number is Not Acceptable) 83 Boca Raton, FL 33433 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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. I am familiar pulturing decomposition of Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature) required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE A TITLE Change Addition Kal Branson 2-3444 ShetlandRur Boca Rapn, FL 334 NAME 1.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 1.4 CHY - ST - 7/P 21 1016 Change Addition TITLE Andrea Miller 12900 SW 13 ST #HEYOU REMOTOICE PINEAFL 3 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADORESS CITY - ST - 7IP 2 4 CHY-ST-7P Addition TITLE 3.1 TIJLE Change 3.2 NAME NAME 33 STREET ADDRESS STREET ADORESS 3 4. CITY - ST - 7/P CITY-ST-ZIP DETETE Change \_\_ Addition TITLE 4.1 Title 300002546913 -06/04/98--01004--050 4.2 NAME NAME 43 STREET ADDRESS STREET ADDRESS \*\*\*150.00 4.4 CITY - ST - 7IP CITY - ST - ZIP DELFTE TITLE 5.1 THUE Change Addition | 5.2 NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - 7IP CITY-ST-ZIP DELETE Change Addition TITLE 6110H 6.2 NAME **63 STREET ADDRESS** STREET ADDRESS 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 supplied and an accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation guide receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FICER OF DIRECTOR

**FILED**