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 # P96000052351 (9)

FILED Aug 14 1997 8:00am Secretary of State

JVB RE	AL ESTATE SERVICES, INC.	(0)		
Principal Place	e of Business	Mailing Address		
POST OFFICE BOX 897 WINTER PARK FL 32790 POST OFFICE BOX 897 WINTER PARK FL 32790			DO NOT WRITE IN THIS SPACE	
)				3. Date Incorporated or Qualified 3a, Date of Last Report
				06/18/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21 /654	PAIM BEACH DR.	26		5'9-3395509 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		Certificate of Status Desired Section
City & State	ŠIC A	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 327	112 25 UJA	29 30	5]	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
BRUUN, JOHANNES V B1 Name),			JOE V. BRUUN	
1656 PALM BEACH DRIVE			82 Street A	Address (P.S. Box Number is Not Acceptable)
APOPKA FL 32712				56 raim BEACH DR
!			83	•
			84 City 🔿 /	
	10.000	1007 1500 51 11 51	17	POPKA FL 85 Zip Code 33 7/2
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 with, and accept the obligations of Section 607.0505, Florida Statutes.				
agent. I am familiar with, and accept the obligations of Section 607 0505, Florida Statutes.				
SIGNATURE	Signature, typed or printed name of registered agent	1. IZCUUN, Pro	egislered Agent signature r	required when a stalled DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	SELECTAM Change Addition
NAME	BRUUN, JOHANNES V		1.2 NAME	RONGER T. BRUUN
STREET ADDRESS	1656 PALM BEACH DRIVE		1.3 STREET ADDRESS	1656 PALM BEACH DR APOPKA, FL 32712
CITY-ST-ZIP	APOPKA FL 32712		1.4 CITY-ST-ZIP	APOPKA, FL 32712
TITLE		☐ DELETE	2.1 TITLE	. Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE	·	☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS		i	3.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	3.4. CITY - ST - ZIP	Change Addition
TITLE		U DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP	Change Addition
TITLE NAME		□ Netrit	5.1 TITLE 5.2 NAME	
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS	
· .				
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Change Addition
NAME		— Dece. 2	6.2 NAME	Chanda Ti Maniful
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	i
VIII-01*6H			0.1 0111 - 01-211	

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 receiven 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 attackment with an address.

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D-1-67 402.889.577