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

**PROFIT** CORPORATION ANNUAL REPORT

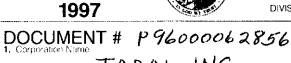


FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**SIGNATURE:** 



**FILED** Apr 15 1997 8:00am Secretary of State

407-632-3922

	JARAL,	INC.					
Principal Pra	ce of Basiness	Maiti	ng Address		_ <del></del>		
	PEACHTREE S		P.O.Bo	× 604			
Coco	OA, FL. 32922	?	TiTUSV	ille, FL. 32781	3. Date Incorporated or Qualified	3a. Date of Last F	Report
2 Prior no 1	Piace of Business	2a M	failing Address	52101	7-29-96 4. FEI Number	New	asked Fee
	PEACHTREE S		PO.Box	604	4, TET NUTISO		pplied For lot Applicable
Suite Ao!			uite, Apt. #, etc.	11.	5. Certificate of Status Desired	□ \$8.75	Additional lequired
22 City & Sta	tie		ity & State	رے۱۱	6. Election Campaign Financing		May Be
	OA FL.	28	Tirusvil	le, FL	Trust Fund Contribution		to Fees
		Z C	2 - 701	Obuntry	8. This corporation has liability for		s. 199.032,
24 329	12 2   25   05 A 9. Name and Address of Co		3278/	30 USA	Florida Statutes  10. Name and Address of New R	Yes No	<del></del> .
		·	eu Agent	81 Name	- 0 0		AW4
	TOYOF C.F	ERRY			JOYCE C, PERR	<u> </u>	
	00700	111		82 Street	Address (P.O. Box Number is Not Accepte	ST ST	
WAIL!	JOYCE C.F P.O. BOX 6	7		83	by a leried to	<u> </u>	***************************************
	Titosville, F		32781	84 City	, , , ,	FL 85 Zip	Code
11. Pursuari	t to the provisions of Sections 607	7.0502 and 607.	.1508. Florida Statut	es, the above-named	corporation submits this statement for the	ourpose of changing i	its registered
office or	registered agent, or both, in the l	State of Florida	Such change was a	authorized by the corp	poration's board of directors. I hereby acce	pt the appointment as	registered
	ani tair sai wiji, ayd accept the d	Unigations (1)	LEL P	Siz In	AP	PI 4 199	) ~g*
SIGNATURE	Bopation typical surface of register	red agent and title if a	pplicable (NOT	E. Registeren Agent signature	required when reinstaling)	RIL 4, 199	<i></i>
12.		S AND DIRECTO	ORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	AS IN 12
TILF			☐ DELETE	1.1 TITLE	P/T/S/D	Change	☐ Addition
NAM)				1.2 NAME	JOYCE C. PERRY	°-	
STREET ADDRESS				1.3 STREET ADDRESS	602 PEACHTREE		
CHY 51-70: THE			DELETE	1.4 CITY - ST - ZIP 2 1 TITLE	COCOA, FLORIDA 3	5 2 9 2 3 ☐ Change	Addition
•			C DECEM	2.2 NAME		□ Citarige	L_J Addition
NAME STREET AUDRESS				2.3 STREET ADDRESS			
CITY-ST-20F				2. 4 CITY-ST-ZIP			
THE			DELETE	3.1 TITLE		Change	AND AND OF THE
NAME				3.2 NAME			K. ~14
STREET ADDRESS				3.3 STREET ADDRESS		V	MIN
CITY Store				3.4. CITY-ST-2IP			-M
THILF			DELETE	4.1 TITLE		☐ Change	Addition
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET ADORESS			
COY ST ZIC			Driete	4.4 CITY - ST - ZIP			# # # # # # # # # # # # # # # # # # #
1 111			☐ DELETE	5.1 TITLE		Change	Addition
NAME CLASSIA ASSOCIA				5.2 NAME			
Street Anotess				5.3 STREET ADDRESS			
00 Y 51 7 : 10'01	<u> </u>		DELETE	5.4 CITY~ST~ZIP 6.1 TITLE	-	LEbanne	Add-tion
ta MA			parad or wash file	6.2 NAME	50000214 -04/16/97010	14395°	and mornal
SMILE A RESERVE				6.3 STREET ADDRESS	-04/16/9(Ult	U <i>5=-</i> -U5U	
- 01 Y S - 7 P				6 4 CITY-ST-ZIP	***165.00		
14. do hen				fy for the exemption si	tated in Section 119.07(3)(i), Florida Statut		
					that my signature shall have the same leg eport as required by Chapter 607. Florida		
	ir Brock 12 or Black 13 if change				, and the same of		···-