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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000066743 (1)

JLBR, INC.

FILED
May 02 1997 8:00am
Secretary of State

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Principal Place of Business Mailing Address					······································				
15 GLENDALE KISSIMMEE F	DRIVE	15 GLENDALE DRIVE	•						
						3. Date Incorporated or Qualified 08/12/1996	3a. Date	e of Last F	Report
2. Principal	Place of Business	2a. Mailing Address 26				4. FEI Number 76-05/08//			pplied For lot Applicable
Suite, Apl	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	SR 75 Additional			
22 City & Sta	ate	City & State	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			6. Election Campaign Financing			
23		28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip 29	30 Co.	untry		8. This corporation has liability for in		x under s No	s. 199.032,
24	9. Name and Address of Curr		[30]	_		Florida Statutes 10. Name and Address of New Reg		<u></u>	
VAI	N METER, BRUCE R			81	Name				
	GLENDALE DRIVE			-					
	SIMMEE FL 34744		82 Street			ess (P.O. Box Number is Not Acceptable	a)		
				83					
				84	City		FL	85 Zip	Code
11. Pursuan	t to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	utes, the a	bove	e-named corp	poration submits this statement for the pu	roose of c	hanging	ts registered
office or agent 1	registered agent, or both, in the Sylam familiar with, and accept the out	te of Florida. Such change was loations of Section 607,0505. F	authorize	d by	the corporat	oration submits this statement for the pu ion's board of directors. I hereby accept	the appoi	ntment as	registered
SIGNATURE	3 C. M	~ Mello	4	_	9-97				
				d Age	nt signature requir	ed when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS DELETE	13.	ITI E		ADDITIONS/CHANGES TO OFFICE		Change	HS IN 12
NAME	VAN METER, JEANNE L	Decere	1.1 TI 1.2 N				L	_ Change	Addition
STREET ADDRESS	AP OLEMBALE SOUR				ADDRESS				
CITY - S1 - 7IP	KISSIMMEE FL 34744			(TV-\$1					
TITLE	D	DELETE	2.1 TI				Ľ	Change	Addition
NAME	VAN METER, BRUCE R		2.2 N	AME					
STREET ADDRESS			2.3 S	TREET	ADDRESS				
CITY - ST - ZIP	KISSIMMEE FL 34744	Concer		ITY-S	51-21P		-	7.0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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STREET ADDRESS			3.2 N		ADDRESS				
City - St - 7IP				HTY-5					
TITLE		☐ DELETE	4.1 Ti				C	Change	Addition
NAME			4. 2 N	AME					ļ
STREET ADDRESS			4.3 S	TREET	ADDRESS				
CITY - ST - ZIF				ITY - \$1	T-ZIP		<u></u>		
TITLE		☐ DELETE	517				L	Change	Addition
NAME CYDELL ADDROCCE			5.2 N		400000				
STREET ADDRESS					ADDRESS				
CITY - \$1 - ZIF		DELETE	5.4 CI 6.1 TI	(TY-SI TLE	1 - ZJP		г	Change	Addition
NAME		hand secretal	6.2 N					→ Avianillo	
STREET ADDRESS					ADORESS				
City-St-7/2				 TY-S1	·				
14 Lela hore	dry carlify that the information number	مريم فمم معمام مجازة وأطف طائب امم	life for the			Lin Continu (10 07/0\/i) Finding Statutes	I de abb a a		45-

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)

SIGNATURE

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-831-5226