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FILED
May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000068997 (1)

1. Corporation Name

CIRCLE J CORPORATION

Principal Place of Business

Mailing Address

~~2821 DAVIS BLVD~~
FT LAUDERDALE FL 33312

~~2821 DAVIS BLVD~~
FT LAUDERDALE FL 33312-2834



3. Date Incorporated or Qualified

08/16/1996

3a. Date of Last Report

2. Principal Place of Business

2b. Mailing Address

21 1583 E SILVERSTAR RD

26 1583 E SILVERSTAR RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 327

27 # 327

City & State

City & State

23 OCOEE, FL

28 OCOEE, FL

Zip

Country

Zip

Country

24 34761

25 USA

29 34761

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NOVOTNY, RORY

~~2821 DAVIS BLVD~~

~~FT LAUDERDALE FL 33312~~

81 Name

NOVOTNY, RORY

82 Street Address (P.O. Box Number is Not Acceptable)

1583 E SILVERSTAR RD

83

327

84 City

OCOEE

FL

85 Zip Code

34761

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.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D NOVOTNY, RORY

STREET ADDRESS ~~2821 DAVIS BLVD~~

CITY-ST-ZIP ~~FT LAUDERDALE FL 33312~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME P NOVOTNY, RORY

1.3 STREET ADDRESS 1583 E SILVERSTAR RD # 327

1.4 CITY-ST-ZIP OCOEE, FL 34761

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 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 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 60, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

1-14-97

CR2E034 (9/96)