AOW: FILING FEE AFTER MAY 1ST IS \$550.00				
Alari	PORATION Sandra B.	Mortham	Principal Control	
	1998 DIVISION OF CORPORATIONS			
DOCUMENT # P96000012394		98 NOV -9 PM 3: 01		
JENNIFER C. DESIGN, INC.			SECRETARY OF STATE TALLAHASSEE FLORIDA	
Principal Place of Business Mailing Address				
3630 SUSTISON RD			DO NOT WRITE IN THIS SPACE	
COCONUT GROVE, FL 33133			3. Date Incorporated or Qualified 8-30-96	
2. Principal f	rincipal Place of Business 2a. Mailing Address 26		4. FEI Number 65-0695309	Applied For Not Applicable
Suite, Apt	#, etc. Suite, Apt. #, etc. 27	***	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24		Country	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PAGLO E. CORREDOR 81 Name				
3630 Street Address (P.O. Box Number is Not Acceptable)				
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				
12.	OFFICERS AND DIRECTORS	Ringistered Agent signature required 13.	when reinstalling) DAT ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE NAME	PVT	1) TITLE 1 2 NAME		AND DIRECTORS IN 12 Change Addition 17 Change Addition 17 Change Addition 18
STREET ADDRESS	JENNIFER G CORREDOR	1.3 STREET ADDRESS		E03
CITY-ST-ZIP	3630 JUSTISON DR.	1.4 CITY+ST-ZIP 2 1 TITLE	,	☐ Change ☐ Addition ○
NAME	PABLO E. CORREDOR	2.2 NAME	3000026	838539.
STREET ADDRESS CITY-ST-ZIP	3630 TUSTISON DR.	2.3 STREET ADDRESS	-11/10/9	801011004
TITLE	DELETE	3.1 TITLE	****150	- 80 change * * 150m,00
NAME		32 NAME	•	
STREET ADDRESS CITY - ST - ZIP		3.3 STREET ADDRESS 3.4. CITY - ST - ZIP		
TITLE	☐ DELETE	41 TITLE		Change Addition
NAME STREET ADDRESS !		4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	L. DELETE	S 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS		5 2 NAME 5 3 STREET ADDRESS		
CITY-ST-ZIP		5 4 CITY - ST - ZiP		
TITLE	LL DELETE.	6.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS		A 6 S NAMC 6 % STREET ADDRESS		
CITY-ST-ZIF		6.4 CITY-ST-ZIP		
14. Thereby 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 nertify 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 offect as if made under oath; that I am an officer or director of the corporation or the regeiver of trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 12 or Block 13 it shanged, or an attachment with an address.				
SIGNATURE: JANATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DRIC THINGTON PROTES				

TO THE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314 ANNUAL REPORT SECTION

JENNIFER C. DESIGN, INC. DOC# P96000072394

TO WHOM IT MAY CONCERN

I AM ENCLOSING A CHECK FOR \$150,00 TO COVER MY 1998 ANNUAL REPORT. I NEVER RECIEVED THE FORM DO TO A CHANGE OF ADDRESS. PLEASE ACCEPT THIS PAYMENT TO COVER THE 1998 ANNUAL REPORT. IF YOU SHOULD HAVE ANY QUESTIONS PLEASE DON'T HESITATE TO CONTACT ME. THANK YOU IN ADVANCE.

SINCERELY YOURS, PABLO E. CORREDOR PRESIDENT