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 # P96000079614 (9)

JTAX CORPORATION

FILED Feb 18 1997 8:00am Secretary of State



Principal Place of Business 3307 PEMBROOK DR SARASOTA FL 34239 2. Principal Place of Business 21 Suite, Apt #, etc.	3307 PEMB	Mailing Address 3307 PEMBROOK DR SARASOTA FL 34239-6702										
							3. Date Incorporated or Qualified 09/23/1996	3a	. Date of I	asi Re	eport	
	lace of Business	2a. Mailing 26	<u> </u>				4. FEI Number 65-0693542	Applied For Not Applicable				
	#, etc.	27					5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	e	28					Election Campaign Financing Trust Fund Contribution	rust Fund Contribution				
Zip 24	Country 25	Zip 29		30 Cour	ntry 		8. This corporation has hability for Florida Statutes 10. Name and Address of New Florida 10. The statutes of New Florida St	Yes	No.		199.032,	
200	9. Name and Address of C	urrent negistered A	gent		81	Name	IU. Name and Address of New I	1981910	TOU ANOTH			
PREWETT, DANIEL L 3307 PEMBROOK DR					B2		ess (P.O. Box Number is Not Accept	able)				
SAH	ASOTA FL 34239			}	83	· · 						
					84	City		I	FL 85	Zip C	Code	
agent I a	m familiar with, and accept the Signature, typed or printed name of register	obligations of, Section of applications agent and title if applications are agent and title if applications.	n 607.0505, FI	lorida Statu TE: Rogistered	ıtes	S.	on's board of directors. I hereby account of the state of	DA	ΤE			
12.	OFFICER OFFICER	S AND DIRECTORS	DELETE	13.	ı C	····	ADDITIONS/CHANGES TO OFF	ICENS		hange	Addition	
THILE NAME	JOHNSON, DAVID P		OLLLIL	1.2 NA						-Cirigo		
STREET ADDRESS	3307 PEMBROOK DR			- 1		ADDRESS						
CITY - ST - ZIP	SARASOTA FL 34239			1.4 CIT	Y-5	T · ZIP						
TIFLE			DELETE	2.1 TIT	LE				☐ C	hange	Addition	
NAME				2.2 NA								
STREET ADDRESS				1		ADDRESS						
TITLE			DELETE	2 4 CI 3 1 TIT		51-212			C	hange	Addition	
NAME			_	3.2 NA	ME							
STREET ADDRESS				3.3 STI	REET	ADDRESS						
CITY-ST-ZIP				3.4. CI		ST - ZIP	· · · · · · · · · · · · · · · · · · ·	_			1 4 4 4 7 7	
TITLE			DELETE	4.1 TIT					[_] c	nange	☐ Addition	
NAME OVERTAR ADDRESS				4. 2 N/		ADDRESS						
STREET ADDRESS C-TY - ST - ZIP				4.4 CIT								
TITLE			DELETE	5.1 7(1			, , , , , , , , , , , , , , , , , , ,	-	C	hange	Addition	
NAME				5.2 NA	ME							
STREET ADDRESS				5.3 ST	REET	ADDRESS						
C TY-SI-ZIP				5.4 CI1		ST - ZIP					F a are	
TITLE			☐ DELETE	6.1 TiT					ЦC	hange	Addition	
NAME				6.2 NA								
STREET ADDRESS				1		ADDRESS						
CITY-ST-ZIP				6 4 CI			in Section 119 07/3)(i) Florida Stati	doc 11	whor corti	fu that	the	

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 appartachment with an address.