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May 09 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 # P96000087696 (6)

1. Corporation Name
J. S. & D. INC.



Principal Place of Business
7802 POWHATAN AVE. AVE., WEST
TAMPA FL 33615

Mailing Address
7802 POWHATAN AVE. AVE., WEST
TAMPA FL 33615

3. Date Incorporated or Qualified
10/21/1996
3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-3418411
Applied For
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

6. Certificate of Status Desired \$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KEAGY, ROGER D
7802 POWHATAN AVE. AVE., WEST
TAMPA FL 33615

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY - ST - ZIP, and a DELETE checkbox. Row 1: D, KEAGY, ROGER, 7802 POWHATAN AVE. AVE., WEST, TAMPA FL 33615.

Table with 5 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY - ST - ZIP, and checkboxes for Change and Addition.

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

SIGNATURE: _____ DATE: 4/22/97 DAYTIME PHONE: 813-884-5487

CR2E034 (9/96)