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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mořtham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000089828 (3)

J. CARSON ENTERPRISES INC.

Principal Place of Business	Mailing Address
4230 \$W 70TH TERRACE	4230 SW 70TH TERRACE
DAVIE FL 33314	DAVIE FL 33314-3134

## FILED Jun 10 1997 8:00am Secretary of State



DAVIE FL 3331		DAVIE FL 33314-3134					
				*:	3. Date Incorporated or Qualified 10/31/1996	3a. Date of La	sl Report
	ace of Business	2a. Mailing Address		<u> </u>	4. FEI Number		Applied For
21		26			65-071395		
Sulte, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Regulred	
City & State		City & State			A Fluid County Fundament	· · · · · · · · · · · · · · · · · · ·	<del></del>
	9	28			Election Campaign Financing     Trust Fund Contribution		<b>00</b> May Be led to Fees
Zip	Country	Zip	Countr	y	8. This corporation has liability for it		
24	25	29	30	•	Florida Statutes See No		
	9. Name and Address of Current		<u>'                                    </u>		10. Name and Address of New Re-	gistered Agent	
CAF	ISON, JEFFREY		81	Name			
	O SW 70TH TERRACE		82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)	
DAV	TE FL 33314		L				
			83	1			
<b>,</b> ^			84	City		85	Zip Code
				' '		FLIII	·
11. Rursuant office or r act nt. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obliga	and 607.1508, Florida Statut of Florida Such change was a lions of, Section 607.0505, Flo	es, the abov authorized b orida Statute	ve-named cor by the corpora es.	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of changir of the appointment	ig its registered Las registered
SIGNATURE						DATE	
12.	Signature, typod or printed name of registered agen OFFICERS AND		13.	gent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC		IORS IN 12
YITLE	Pres	DELETE	1.1 TITLE	····	ADDITIONO/OFFICE TO OFFICE	Char	
NAME .	WARRY J. CANSOH		1.2 NAME				• —
STREET ADDRESS	4230 DW 70 ten	· <del>c-</del>		T ADDRESS			
CITY-ST-ZIP	DAVIG PLA 335		1.4 D/TY-				
TITLE	110	☐ DELETE	21 TITLE			☐ Char	nge 🔲 Addition
NAME	HOAM I CANDON		2.2 NAME				
STREET ADDRESS	4230 50 70 tente		23 STREE	T ADDRESS		-	
CITY-ST-ZIP	Davis Cla. 733	,	2. 4 City	-ST-ZIP			
TITLE	THE	☐ DECETE	31 1111.[			L Char	nge 🔲 Addition
NAME	Kelly K. CARDON 4250 Sur TO LINE		3.2 NAME				
STREET ADDRESS	4230 su 70 time		3.3 STREE	T ADORESS			
CITY-ST-ZIP	DAVIE Pla.		3.4 CITY	· ST- ZIP			——————————————————————————————————————
TITLE	<b>\$</b> € ( .	☐ DELETE	4.1 TITLE			Char	nge L Addition
NAME	LIMBTON L. CHRESIN		4. 2 NAM				
STREET ADDRESS	was so to seek			T ADDRESS			
CITY-ST-ZIP	DAVILLE FLA.	T DELETE	4.4 CITY-	S1-ZIP	<del> </del>	T 1 24.	
TITLE	VP/Communications	☐ DELETE	5.1 TITLE			☐ Char	nge L Addition
NAME	TED JOHNSON		5.2 NAME				
STREET ADDRESS	4230 30 70 tok			1 ADDRESS			
CITY-ST-ZIP	Davie Fla.	DELETE	5.4 CITY -	ST-2(P		Char	nge Addition
TITLE	JANE SILOUP , QV	וון טבנגוב	6.1 TITLE			☐ Char	iño 🗀 vonitiou
NAME	Tyler 1. CARSON		6.2 NAM8				
STREET ADDRESS	4230 SW 70 to			T ADDRESS			
CITY-ST-ZIP	DAVIG FLA.)		64 CITY-	ST-7IP			

I do hereby certify that the information supplied with this illing 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 of supplied or tall 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 epiporality 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 12 inchanged, or on an attachment with an address.

SAN MARIE TO CO. 1 4 16