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

PROFIT CORPORATION ANNUAL REPORT 1998 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS Mar 09 1998 8:00am Secretary of State

DOCUMENT # P96000090561 (7) THE LJA CORPORATION Principal Place of Business Mailing Address POST OFFICE BOX 16766 3586 53RD AVE N ST PETERSBURG FL 33714 ST PETERSBURG FL 33733 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/31/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 26 59-3414878 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζıρ Country 8. This corporation owes or has paid the current year Intangible X Yes 24 25 29 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name HEISTAND, PAUL K 221 SECOND AVE N 82 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33701 83 84 City Zip Code Pursuant to the provisions of Soctions 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 Fkrida. 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, typod or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELFTE 1.1 TITLE Change Addition TITLE TESSIER, JOSEPH H 1.2 NAME NAME 4351-106TH DR N STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELFTE Change Addition 2.1 TITLE TITLE TESSIER, ANNETTA L 2.2 NAME NAME 4351-106TH DR N STREET ADDRESS 23 STREET ADDRESS CLEARWATER FL 34622 CITY-ST-ZIP 2.4 City-ST-ZiP DELETE Change Addition TITLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 51 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZiP DELETE Change Addition TITLE 61 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

14. I 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 conferation or the receiver or tractice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charactery or or an affecting of the conferation of the c

SIGNATURE:

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