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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000092494 (9)

J. B. CANVAS INC. Principal Place of Business Mailing Address 1100 NW 53 ST. STE. 6 1100 NW 53 ST. STE. 6 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309-3169 3. Date Incorporated or Qualified 3a. Date of Last Report 11/07/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite Apt. # etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zio This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BUXTON, JEFFREY A 1100 NW 53 ST. STE. 6 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33309 83 84 City 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. It hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typing or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) (96/6) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 DELETE Change Addition 1.1 TITLE TITLE Mesiclen t NAME Jeff Burto 1.2 NAME CR2E034 1100 N.W.53 13 STREET ADDRESS STREET ADDRESS 1.4 City-St-ZiP CITY-ST-ZIE Change Addition 2.1 TITLE TITLE JON CAMPO 2.2 NAME 1100 N.W. 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition TITLE 31 TITLE 3.2 NAME NAME STREET ADDRESS 9.3 STREET ADDRESS 0-1Y-S1-7P 3.4. CITY-ST-ZIP DELETE Change Addition A 1 TITLE 7111.6 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CHTY - \$1 - 74-Change Addition DELETE **TOUR** 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-S1-ZIF DELETE Change Addition 6.1 TITLE 111.1 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

SIGNATURE:

appears in Block 12 or Block 13

CITY - \$1 - 21F

VAME OF SIGNING OFFICER OR DIRECTOR

6.4 CITY - ST - ZIP

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 agricult 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 of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

4/28/87 (84)491-275

FILED

May 14 1997 8:00am

Secretary of State

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