	TICE: CORPORATION WILL BE DI E ON OR BEFORE 09/30/98: \$550 (IF DISSO			AFTILITED	0065373
COR	PROFIT PORATION JAL REPORT	Sandr	PARTMENT OF STATE a B. Mortham	FILED	
	1998	9 .7/	retary of State* OF CORPORATIONS	98 OCT 14 PM 2: 07	
DOCUMENT # P9700006943 (9)				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
JVC ARM	ISTRONG ENTERPRISES, IN	C.		(1231(29) 1/5 (b)) (50) (50) (50) (50) (50) (50) (50) (5	ı
Principal Place	a of Divisions	Mailing Address			
833 RIVERSIDE	DRIVE, UNIT 813	833 RIVERSIDE DRIVE.			
CORAL SPRING	IS FL 33071	CORAL SPRINGS FL 33	071	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 01/23/1997	
2. Principal Pi	Cleura BVd.	2a. Mailing Address	learn gird	4. FEI Number 7225 05 Applied For Not Applicable	le l
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 27	214 Country	29 Zip 33374	Country 30 US R	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	_
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent	
	rilawyer Chartered Almeria Avenue			LAW Offices Stuart Morris P.A. Address (P.O. Box Number is, Not Acceptable)	7
COR	AL GABLES FL 33134		83 2	Soo N. Military 70411	_
			94 City	33321	_
11. Pursuant	to the provisions of sections 607/0502 a	and 607.1508, Florida Sta f Florida Such change wa			\dashv
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					
12.	Signature, typed or printed name of registered agent a OFFICERS AND		(NOTE: Registered Agent signature 13.	a required when reinstating) [DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	(8g)
TITLE NAME	PTD / ARMSTRONG, JAMES JR.	DELETE	1.1 TITLE 1.2 NAME	James Ainstron & Addition	CR2E034 (5/98)
STREET ADDRESS	833 RIVERSIDE DRIVE, UNIT 813		1.3 STREET ADDRESS	1150 (100) 100	ZEO:
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY-ST-ZIP	PlastAtion, F1 33327	
TITLE NAME	VSD ARMSTRONG, VICTORIA	DELETE	2.1 TITLE 2.2 NAME	Change Additio	ח ו
STREET ADDRESS	833 RIVERSIDE DRIVE, UNIT 813		2.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33071		2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	Change Addition	n
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS	$\sim 10^{-6}$	(
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	✓ Change ☐ Additio	ות
NAME			4.2 NAME	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
STREET ADDRESS			4.3 STREET ADDRESS	2000026692821 -10/20/9801064020	-
CITY-ST-ZIP TITLE		Doe: exc	4.4 CITY-ST-ZIP 5.1 TITLE	****558.75 ****558	∺
NAME		L DELETE	5.2 NAME	Change Li Addition	"
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	 -	DELETE	6.1 TITLE	Change Addition	ın
NAME			6.2 NAME		1
STREET ADDRESS			6.3 STREET ADDRESS		1
14. I hereby ce	ertify that the information supplied with the	is filing does not qualify for	6.4 CITY-ST-ZIP or the exemption stated in	section 119.07(3)(i), Florida Statutes. I further certify that the information	\dashv
indicated of an officer of in Block 12	on this annual report or supplemental ar or director of the corporation or the rece 2 or Block 13 if changed, or on an attact	nual report is true and ac liver or trustee empowere hment with an address.	ccurate and that my signa d to execute this report a	ture shall have the same legal effect as if made under oath; that I am sequired by Chapter 607, Florida Statutes; and that my name appears	