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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra P. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000016410 (7)

JOHNCKE'S INTERNATIONAL GOLF, INC.

Principal Place of Business

Mailing Address

1419 OCEAN DUNES CIRCLE JUPITER FL 33477

1419 OCEAN DUNES CIRCLE JUPITER FL 33477

FILED Jun 29 1998 8:00am Secretary of State



				3. Date incorporated or qualified	
	<u>:</u>			02/20/1997	
- 0 <i>-</i>	Place of Business	2a. Mailing Address	Ha.	4. FEI Number	Applied For
21 200	8:05 COUT	26 0 508 23	C E COLT	65-6728684	Not Applicable
Suite, Apt.	#, \$ [C.	Suife, Apt. #, etc	U	5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	Θ	- 121 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		6. Election Campaign Financing	\$5.00 May Be
23 140	ite FL	28 Jup ter	, 4 h	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24 334	1 25 PLM Dell	U29 334++ 3	101Palm Beau	Personal Property Tax due June 30.	Yes No
	Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
AM	IERILAWYER CHARTERED		81 Name 1	oter Johnste	
343 ALMERIA AVENUE			82 Street Address (P.O. Box Number) Not Acceptable)		
CORAL GABLES FL 33134			ASOR 25 Th COURT WITH		
	क है. स		83	S'	
			84 City 1		85 Zip Code
	<u> </u>		الدالع ا	boster FL	33447
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statules	s, the above-named control by the corner	rpolition submits this statement to, are purpose cation's board of directors. I hereby accept the appropriate the purpose of t	f changing its registered
agent. I a	m f ami liar with, and agrept the blig	ations of, Section 607.0505, Flori	ida Ştatules.	anon's board or directors. Thereby accept the app	Jointinont as registered
SIGNATURE	- the	Lu Peter	Johnske	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
			Angistered Agent signature requ		
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTORS IN 12 Change Addition
TITLE	PSTD	DELETE	1,1 TITLE	President Dake	Cuange [Audition
NAME	JOHNCKE, PETER		1.2 NAME	Johneke Pour	
STREET ADDRESS	1419 OCEAN DUNES CIRCLI	<u> </u>	1.3 STREET ADDRESS	Johnske Pake 25th Court 3547	17
CITY-ST-ZIP	JIPITER FL 93477	₩ DELETE	1.4 CITY-ST-ZIP	Supitel, Fr 3571	Change Addition
TITLE	V	Dettere	2.1 THILE	•	Cusude T vodition
NAME	RIDER, JENNIFER	-	2.2 NAME		
STREET ADDRESS	1419 OCFAN DUNFS CIRCU	=	2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	JUPITER FL 33477	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
	ŧ		3.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME			4.1 TILLE 4.2 NAME		F Summer F Legalities
STREET ADDRESS	**************************************		4.3 STREET ADDRESS		
	e de la companya de l		4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE		Change Addition
NAME	2	24421E	5.2 NAME		
STREET ADDRESS) 		5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHTY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME	-		6.2 NAME	10000257673 -07/01/88010080	₹1 7% 0
STREET ADDRESS			6.3 STREET ADDRESS		23 //`
OTV_ST_210	ਤ ਨ		6.3 STREET ADDRESS	***1S0.00	<i>"</i> U

I hereby certify that the information supplied with this filling 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. 561/JULY ULKI

12.190