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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000074315 (7)

J'S STUFF, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 100 SOUTH ASHLEY DRIVE 100 SOUTH ASHLEY DRIVE **SUITE 1745 SUITE 1745** DO NOT WRITE IN THIS SPACE TAMPA FL 33602 **TAMPA FL 33602** 3. Date Incorporated or Qualified 08/27/1997 2, Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 65~0779585 Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GOODRICH, LAURENCE I 100 SOUTH ASHLEY DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1745** 83 **TAMPA FL 33602** 64 City 85 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and tried apply shore (NOTE: Registered Agent signature required when romstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TO LE Director 1.2 NAME NAME Laurence I. Goodrich STREET ADDRESS 100 South Ashley Drive - Suite 1745 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-ZIP Tampa, FL 33602 DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2. 4 City - St - ZiP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-S1-ZIP DELFTE Addition Change TITLE 5.1.1/ILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-ST-ZIP DELFTE Addition Change TITLE 6.1 1111.0 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CHY-S1-7/P

14. Thereby 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 corporation or the representation of the corporation or the representation of the corporation of

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