

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

FILED  
Jul 02 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000095373 (1)**

1. Corporation Name  
**JUNGLE GREEN INC.**



Principal Place of Business <b>815 SW 30 STREET STE N FT LAUDERDALE FL 33315</b>	Mailing Address <b>815 SW 30 STREET STE N FT LAUDERDALE FL 33315</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>11/06/1997</b>	
4. FEI Number <b>05-0807845</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	27 City & State	28 City & State
22 City & State	23 Zip	24 Country	25 Zip
26 Country	27 Zip	28 Country	29 Zip
30			

9. Name and Address of Current Registered Agent

**CORPORATE CREATIONS ENTERPRISES INC  
4521 PGA BLVD #211  
PALM BEACH GARDENS FL 33418**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

**FL**

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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<b>Tolz, Craig</b>
NAME	<b>TOLZ, CRAIG</b>	1.2 NAME	<b>815 SW 30th St. Suite N</b>
STREET ADDRESS	<b>4521 PGA BLVD #211</b>	1.3 STREET ADDRESS	<b>Ft. Lauderdale FL 33319</b>
CITY-ST-ZIP	<b>PALM BEACH GARDENS FL 33418</b>	1.4 CITY-ST-ZIP	
TITLE	<b>D</b>	2.1 TITLE	<b>Moretti, Patrice</b>
NAME	<b>MORETTI, PATRICE</b>	2.2 NAME	<b>815 SW 30th St. Suite N</b>
STREET ADDRESS	<b>4521 PGA BLVD #211</b>	2.3 STREET ADDRESS	<b>Ft. Lauderdale FL 33315</b>
CITY-ST-ZIP	<b>PALM BEACH GARDENS FL 33418</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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.

CR2E034 (10/97)