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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # S05183 (6) JPL PARTNERS, INC.					
Principal Place of Business 8461 WATERFORD CIR TAMARAC FL 33321		Mailing Address 8461 WATERFORD CIR TAMARAC FL 33321			
				3. Date Incorporated or Qualified 10/08/1990	3a. Date of Last Report 04/10/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
1	F # ata	26 Cuito Act # etc		65-0225012	Not Applicable
Suite, Apl	t. # ₁ etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ate	City & State		6. Election Campaign Financing	\$5.00 May Be
3	Country	28	Countai	Trust Fund Contribution	Added to Fees
Ζιρ 4	Country 25	Zip 29	Country 30	8. This corporation has liability for it Florida Statutes	
	g. Name and Address of Currer			10. Name and Address of New R	· · · · · · · · · · · · · · · · · · ·
			81 Name		
LAUTENSACK, PAUL 8461 WATERFORD CIR			82 Street Add	iress (P.O. Box Number is Not Acceptab	le)
	RAC FL 33321		83		
			84 City		85 Zip Code
	····				FL S The same
11. Pursuan or regist familiar v	it to the provisions of Sections 607.0502 tered agent, or both, in the State of Flori with, and accept the obligations of, Sect	2 and 607.1508, Florida Stall ida. Such change was author tion 607.0505, Florida Statute	ites, the above-named corpo ized by the corporation's boa is.	oration submits this statement for the puri and of directors. Thereby accept the appo	pose of changing its registered offici pintment as registered agent. I am
or regist familiar v SIGNATURE	lered agent, or both, in the State of Flori with, and accept the obligations of, Sect Signature, based or printed name of registered agent	ida. Such change was author tion 607.0505, Florida Statute	Ites, the above-hamed corporation is boat to the corporation is boat to the corporation is boat to the corporation in the corpo	ard of directors. Thereby accept the appo	intment as régistered agent. Lam
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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 or Block 13 or on an attachment with an address.

SIGNATURE:

Para Lauten Back
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/46 (954) 968-7258