

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

FILED  
Jan 27 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 # **S23660**

(1)

1. Corporation Name  
**JENCOB CORP.**



Principal Place of Business

**4801 SHERIDAN ST  
SUITE 500  
HOLLYWOOD FL 33021  
US**

Mailing Address

**4801 SHERIDAN ST  
SUITE 500  
HOLLYWOOD FL 33021  
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 <b>2445 Hollywood Blvd.</b>	26 <b>2445 Hollywood Blvd.</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 <b>Suite 105</b>	27 <b>Suite 105</b>
City & State	City & State
23 <b>Hollywood, FL</b>	28 <b>Hollywood, FL</b>
Zip	Zip
24 <b>33020</b>	29 <b>33020</b>
Country	Country
25 <b>USA</b>	30 <b>USA</b>

3. Date Incorporated or Qualified <b>12/27/1990</b>	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number <b>65-0237555</b>	
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 type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MORGAN, HENRY J.  
4801 SHERIDAN ST  
SUITE 500  
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81 Name	<b>Ruth D. Morgan</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>2445 Hollywood Boulevard</b>
83	<b>Suite 105</b>
84 City	<b>Hollywood</b>
85 Zip Code	<b>FL 33020</b>

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]* *[Signature]* *[Signature]* **1/20/98**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>VD</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>MORGAN, HENRY J.</b>	
STREET ADDRESS	<b>4801 SHERIDAN ST, STE 500</b>	
CITY-ST-ZIP	<b>HOLLYWOOD FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Ruth D. Morgan</b>	
1.3 STREET ADDRESS	<b>2445 Hollywood Blvd., Suite 105</b>	
1.4 CITY-ST-ZIP	<b>Hollywood, FL 33020</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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.

SIGNATURE: *[Signature]* *[Signature]* *[Signature]* **1/20/98**

CP2E034 (10/97)