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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S54605 (8) JIMSHE, INC.								
Principal Plac		Mailing Addr			·····	—		//1 // /
SUITE 501 PER	NTHOUSE FLOOR	P. O. BOX 372	C/O WALL. KENNETH R. CPA P. O. BOX 372408 SATELLITE BEACH FL 32937-0408					
MELBOURNE FI	L 32901	US US	AUN PL 3283/	-0400			Date of Last Rep 105/1996	port
2. Principal P	Page of Business	2a. Mailing A	ddress			4. FEI Number		lied For
21	M. edo	26 Suite Ac	Suite Apt, #, etc.			59-3067884		Applicable
Suite, Apl. 22	#, etc	<u>├</u> ─-1	27			5. Certificate of Status Desired	\$8.75 Ad Fee Req	
City & Stat	ie		City & State			6. Election Campaign Financing	\$5.00 N	/lay Be
23 Zip	Country	28 Zip		Country		Trust Fund Contribution	Added to	
24	25	29	<u> </u>	30		8. This corporation has liability for intangible Florida Statutes Yes	e tax under s. 1 No	199,032
	9. Name and Address of Curr	ent Registered Age				10. Name and Address of New Registered	Agent	
	L, KENNETH R.			81	Name			
) Highway A1A Ellite Beach Fl 32937			82	Street Addi	ress (P.O. Box Number is Not Acceptable)		
SAII	ELLITE BEACH FL 32837			83				
				84	City		85 Zip Co	ode
						FI	-	
office or r agent. La SIGNATURE	registered agent, or both, in the Sta am familiar with, and accept the obl Stackin, typed or pertea name of registered a	igations of, Section 6	i07.0505, Flor	rida Statute	S.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as re	egistered
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS	IN 12
TITLE	VSD	ļ] DELETE	1.1 TITLE			Change	Addition
NAME STREET ADDRESS	ALEXANDER, JIMMIE M 2205 STATE ROUTE CC			1.2 NAME 1.3 STREET	ATIONECE			
CITY-ST-ZIP	WEST PLAINS MO			1.4 CiTY - S	í			
THILE	PTD		DELETE	2.1 TITLE			Change	Addition
NAME	ALEXANDER, SHERRY T			2.2 NAME				
STREET ADDRESS	2205 STATE ROAD CC			2.3 STREET	1		•	ţ
CITY ST-709 DIGE	WEST PLAINS MO		DELETE	2 4 CITY - 3 1 TITLE	ST-ZIP		Change	Addition
NAME		-		3.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CiTY-ST ZIP	For two control of a control of the			3.4, CłTY~	ST-ZIP			
TITLE		L.] DELETE	4.1 TITLE			L_J Change	Addition
NAME CHARLE EDECACE				4. 2 NAME 4.3 STREET	+DDDCCC			
STREET ADDRESS CITY - ST-ZIP				4.4 CITY-5	1			
Tillf			DELETE.	5.1 TITLE	2. 2."	The second secon	Change	Addition
NAME				52 NAME				
STHEET ADDRESS				5 3 STREET	ADDRESS	en e		
CITY-S1 Zit			DELÉTÉ	5.4 CITY - 5	IT-ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition
TITLE NAME		l	ן טנגנונ	6.1 TITLE 6.2 NAME			FT custids	TTI Modicioni
STREET ADDRESS				6.2 NAME	ADDRESS			
City-S1-ZiP				6.4 CITY-S				
14. Ldo here	by certify that the information supp	lied with this filing do	es not qualify	for the exe	emption states	d in Section 119.07(3)(i), Florida Statutes. I furth It my signature shall have the same legal effect:	er certify that th	10 or path; that
Lam an q	on Indicated on this annual report of officer or director of the corporation in Block 12 or Block 13 if changed,	or the receiver or tru	stee empowe	ered to exec	cute this repo	it my signature shall have the same legal effect i ort as required by Chapter 607, Florida Statutes;	and that my na	ime

SIGNATURE

3/27/9.7

(407) 777-6582

FILED

Apr 04 1997 8:00am

Secretary of State