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

FORT MYERS FL 33907

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	IENT # S74	4503	(1)							
J.J.'S CORNER, INC.							1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
District District	d During		n II. a. A daluga a							
Principal Place of Business Mailing Address (O ROBERT D. ROYSTON JR. C/O ROBERT D. ROYSTON JR										
2670 NEW BRITTANY BLVD. SUITE 101 12670 NEW BRITTANY BLVD. SORT MYERS FL 33907 FORT MYERS FL 33907-3650					101					
							3. Date Incorporated or Qualified 08/20/1991		e of Last 4/1996	
2. Principal Pla	ce of Business	ļ <u>-</u>	Mailing Address				4. FEI Number			Applied For
1		26	Duda Ana H - A				65-0278134			Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be of to Fees
Ζιρ 4	Country 25	29	Zip	Cour	ntry		8. This corporation has liability for I Florida Statutes		ax undei] No	r s. 199.032,
	9. Name and Address	of Current Regis	tered Agent	 			10. Name and Address of New Re	platered A	gent	
ROYSTON, ROBERT D., JR. 12670 NEW BRITTANY BLVD., #101 FORT MYERS FL 33907					81 Name					
					82 Street Address (P.O. Box Number is Not Acceptable)					
					83					
					84 (City	The state of the s	FL	85 Z	p Code
11. Pursuant to office or repagent. Lam	the provisions of Section gistered agent, or both, in familiar with, and accep	ns 607.0502 and £ in the State of Flori of the obligations o	07.1508, Florida Statut da. Such change was a f, Section 607.0505, Flo	tes, the ab authorized orida Stati	ove-n by trutes.	named co ne corpor	propriation submits this statement for the pration's board of directors. I hereby accept	urpose of a	changing intment	j its registered as registered
SIGNATURE =	transfers Local remailed come o	I recustoment accord to 4 title	il amolicable /NOT	F. Banielevad	Anani s	sinnaluse red	n ired when reinstaling)	DATE		
					stered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				ORS IN 12	
	D	TOPTIONING ONITE	DELETE	11 11	ı F				X Chang	
	AMES. JEROME J. SI	D	transfe.	1.2 NA			•		E	, Jacobson I
NAME	AMICO, JERUME J. O.	rt.		■ 1.2 NA	NIE.					Į.

FILED

Feb 17 1997 8:00am

Secretary of State

SIGNATURE Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13, DELETE TITLE 1.1 T AMES, JEROME J. SR. NAME 1.2 N 1012 DolphinmDrive 12670 NEW BRITTANY BLVD. 1.3 STREET ADDRESS STREET ADDRESS FORT MYERS FL Cape Coral, FL 33904 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE **Change** Addition TITLE 2.1 TITLE AMES, K.F. 2.2 NAME NAME 1012 Dolphin Drive 12670 NEW BRITTANY BLVD. 2.3 STREET ADDRESS STREET ADDRESS Cape Coral, FL 33904 FORT MYERS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition HILE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE THLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-\$1-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. | Jurther 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.

6.4 CITY - ST-ZIP

SIGNATURE:

UPILEROME J. AMES SA. 2-4-99