

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

FILED
May 06 1997 8:00am
Secretary of State

| | | |
|--|---|--|
| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|--|---|--|

DOCUMENT # **V46507** (2)
1. Corporation Name
P.J.'S III, INC.



| | |
|--|---|
| Principal Place of Business 1408 IMPERIAL STREET MERRITT ISLAND FL 32952 | Mailing Address 1408 IMPERIAL STREET MERRITT ISLAND FL 32952-3630 |
|--|---|

| | |
|--|--|
| 3. Date Incorporated or Qualified 06/29/1992 | 3a. Date of Last Report 04/30/1996 |
|--|--|

| | | |
|---|--|--|
| 2. Principal Place of Business 21 140-A IMPERIAL ST. Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25 | 2a. Mailing Address 26 140-A IMPERIAL ST. Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 | 4. FEI Number 59-3138367 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|--|

9. Name and Address of Current Registered Agent

DAVIS, PAULA
1408 IMPERIAL STREET **140-A IMPERIAL ST.**
MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent

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

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

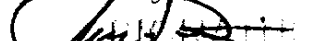
Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-----------------------------|---|---------------------------|
| TITLE | PO | 1.1 TITLE | P/T/D |
| NAME | DAVIS, PAULA | 1.2 NAME | |
| STREET ADDRESS | 1408 IMPERIAL STREET | 1.3 STREET ADDRESS | 140-A IMPERIAL ST. |
| CITY-ST-ZIP | MERRITT ISLAND FL | 1.4 CITY-ST-ZIP | |
| TITLE | SD | 2.1 TITLE | V/S/D |
| NAME | DAVIS, JERRY | 2.2 NAME | |
| STREET ADDRESS | 1408 IMPERIAL STREET | 2.3 STREET ADDRESS | 140-A IMPERIAL ST. |
| CITY-ST-ZIP | MERRITT ISLAND FL | 2.4 CITY-ST-ZIP | |
| TITLE | | 3.1 TITLE | AST |
| NAME | | 3.2 NAME | LEIGHTY, MARYANN |
| STREET ADDRESS | | 3.3 STREET ADDRESS | 140-A IMPERIAL ST. |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | MERRITT ISLAND, FL |
| 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 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. 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:  **JERRY F. DAVIS** 4/6/97 (1408) 1408-1408

CR2E034 (9/96)