FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT

1996



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

DOCUMENT	#
1. Corporation Name	•

V49963

JACQUES PENNY, INC.

ı		• • •			•			.,	•							B.	10		٠	121			•1		•	•	• 1	••	• 1			•		•	s t		•				
		Ш	н	II	Ш	и	Ш	Ш		и	Ш	П		Ш	Ħ	H	Ш	ı	1	Ш	Н	Ш	Ш	П	Ш	H	П	П	и	Ш	Ш	Ш	Н	II	H	П	ı	ľ		Ш	п
	Н	Ш	ш	Н	II	ш	Ш			Ш	Ш	п	1	ш	H	H	11	Ш	1	IŁ	Ш	Ш	H	П	П	H	11	Ш	Н	Ц	Ш	H	Н	II	ш	П	H	н		Н	ш
	Н	Ш	ш	Ш	п	и	Ш			Ш	Ш	п	ш	н	1	Ш	Ш	П	1	Ш	4	Ш		П	Ш	H	11	Ш	ш	И	Ш	H	и	II	٩i	П	H	н	1	Ш	ш
	Ш	Ш	ш	Ш	H	Н	Ш			H	Ш	п	1	Ш	H	Ш	Ш	Ił	ı	Ш	n	Ш	Ш	П	и		11	и	Ħ	Н	Ш	ш	и	II	11	П	H	н	ı	Ш	ш
	ш	ш		ш	п	ш	ш			ш	Ш		ш	и		H		88		ш		•			ı.			и	•	и	ш	ĸ	п	и				31			ш

						I (18 18 1 18 18 18 18 18 18 18		/(! 9 3
Principal Place o	of Business	Mailing Address			e ikāli dilāti ālālā iātin inlin i):ISQ		161 A1A11 A1A14 1A61
11401 PINES	S BLVD #418	11401 PINES BLVI	D.					
	PINES FL 33026	418	C F1 00000					
US		PEMBROKE PINES US	S FL 33026		3. Date Incorporated or Qualified 07/10/1992	3a. Date of	Last Re 5/01/1	
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number 65-0343702	<u> </u>		Applied For Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip	Country	Zip	Cou	intry	8. This corporation has liability for		under s	199.032,
24	25	29	30		7	s ∐No		
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New I	Registered Ag	ent	
				81 Name				
	in, june Acosta dr., West		i	82 Street Addr	ress (P.O. Box Number is Not Acceptal	ble)		
PEMBA	OKE PINES FL 33026			83				
				84 City		FL	85 Zip	p Code
	s the provisions of Sections 607 Unit		tirres, ine apc	ove-named corpor	ration submits this statement for the pu	orpose of criang	gistered	agent. I am
or registere familiar with	d agent, or both, in the State of Flo n, and accept the obligations of, Se	orida. Such change was autho	prized by the i	corporation's boar	ird of directors, i hereby accept the app	SOMUTION BS TO	Ü	
or registere familiar with SIGNATURE	d agent, or both, in the State of Flo	orida. Such change was autho ection 607.0505, Florida Statut	orized by the ites.	corporation's boar	ed when reinstating)	DATE.		
or registere familiar with SIGNATURE	d agent, or both, in the State of Flo n, and accept the obligations of, Se signature, typed or printed name of registered age OFFICERS A	orida, Such change was authoriction 607.0505, Florida Statut ent and little if applicable IND DIRECTORS	INOTE: Registered	corporation's boar		DATE FICERS AND D	DIRECTO	DRS IN 12
or registere familiar with SIGNATURE	d agent, or both, in the State of Flo n, and accept the obligations of, Se signature, typed or printed name of registered age OFFICERS A	orida. Such change was autho iction 607.0505, Florida Statut ent and litte if applicable	orized by the ites. [NOTE: Registered	corporation's boar	ed when reinstating)	DATE FICERS AND D		
or registere familiar with SIGNATURE	d agent, or both, in the State of Flo , and accept the obligations of, Se signature, typed or printed name of registered agr OFFICERS A D CURRAN, JAMES	orida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable ND DIRECTORS	INOTE: Registered	d Agont signature require	ed when reinstating)	DATE FICERS AND D	DIRECTO	DRS IN 12
or registere familiar with SIGNATURE SIGNATURE 12.	d agent, or both, in the State of Flo , and accept the obligations of, Se signature, typed or printed name of registered agr OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE	orida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable ND DIRECTORS	INOTE: Registered 1.1.1 T 1.2 N	d Agont signature require	ed when reinstating)	DATE FICERS AND D	DIRECTO	DRS IN 12
or registere familiar with SIGNATURE 112. 11TLE NAME	d agent, or both, in the State of Flo , and accept the obligations of, Se signature, typed or printed name of registered agr OFFICERS A D CURRAN, JAMES	orida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable ND DIRECTORS	INOTE Registered [NOTE Registered] 13. 1.11 1.2 N 1.3 S	d Agent signature requires	ed when reinstating)	DATE FICERS AND D	DIRECTO Change	DRS IN 12
or registere familiar with SIGNATURE:S 12. 1ITLE NAME STREET ADDRESS	d agent, or both, in the State of Flo , and accept the obligations of, Se signature, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D	orida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable ND DIRECTORS	INOTE Registered [NOTE Registered] 13. 1.11 1.2 N 1.3 S	Agent signature requires ITLE AME TREET ADDRESS ITY - ST-ZIP	ed when reinstating)	DATE FICERS AND D	DIRECTO	DRS IN 12
or registere familiar with SIGNATURE. SITE NAME STREET ADDRESS CITY-ST-ZIP	d agent, or both, in the State of Flo , and accept the obligations of, Se signature, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE	prida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable IND DIRECTORS DELETE DRIVE	INOTE: Registered 13. 1.11 1.2 N 1.3 S 1.4 C	I Agent signature requires ITLE AME TREET ADDRESS ITY-ST-ZIP	ed when reinstating)	DATE FICERS AND D	DIRECTO Change	DRS IN 12
or registere familiar with SIGNATURES 12. 11 LE NAME STREET ADDRESS CITY- ST-2IP TILE	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable IND DIRECTORS DELETE DRIVE	NOTE Registered 13. 1.11 1.2 N 1.3 S 1.4 C 2.11 2.2 N	I Agent signature requires ITLE AME TREET ADDRESS ITY-ST-ZIP	ed when reinstating)	DATE FICERS AND D	DIRECTO Change	DRS IN 12
or registere familiar with SIGNATURES 12. 11LE	d agent, or both, in the State of Flo , and accept the obligations of, Se signature, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE	prida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable IND DIRECTORS DELETE DRIVE DRIVE	rNOTE Registered by the release. NOTE Registered 13. 1.11 1.2 N 1.3 S 1.4 C 2.11 2.2 N 2.3 S 2.3	I Agent signature requires ITLE AME TREET ADDRESS ITY - ST - ZiP ITILE AME	ed when reinstating)	DATE.	DIRECTO Change Change	ORS IN 12 Addition Addition
or registere familiar with SIGNATURE: 112. 11ILE NAME STREET ADDRESS CITY-ST-2IP TIDLE NAME STREET ADDRESS STREET ADDRESS	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable IND DIRECTORS DELETE DRIVE	rNOTE Registered by the release. NOTE Registered 13. 1.11 1.2 N 1.3 S 1.4 C 2.11 2.2 N 2.3 S 2.3	I Agent signature requires ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP	ed when reinstating)	DATE.	DIRECTO Change	DRS IN 12
or registere familiar with SIGNATURE: 112. 11/LE NAME STREET ADDRESS CITY-ST-ZIP TIDLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable IND DIRECTORS DELETE DRIVE DRIVE	rNOTE Registered by the ries. NOTE Registered 13. 1.1 1.2 N 1.3 S 1.4 C 2.1 2.2 N 2.3 S 2.4 C C C C C C C C C	I Agont signature requires ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IMME TREET ADDRESS ITY-ST-ZIP ITLE ITREET ADDRESS	ed when reinstating)	DATE.	DIRECTO Change Change	ORS IN 12 Addition Addition
or registere familiar with SIGNATURE: 112. 11ILE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable IND DIRECTORS DELETE DRIVE DRIVE	rNOTE: Registered 13. 1.11 1.2N 1.3S 1.4C 2.11 2.2N 2.3S 2.4C 3.11 3.2N	I Agont signature requires ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IMME TREET ADDRESS ITY-ST-ZIP ITLE ITREET ADDRESS	ed when reinstating)	DATE.	DIRECTO Change Change	ORS IN 12 Addition Addition
or registere familiar with SIGNATURE: 112. 11ILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and litle if applicable IND DIRECTIORS DELETE DRIVE DELETE DRIVE	rNOTE: Registered by the ries. 13. 1.11 1.2N 1.3S 1.4C 2.11 2.2N 2.3S 2.4C 3.11 3.2N 3.3S 3.4C	I Agont signature requires ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE ITLE	ed when reinstating)	DATE FICERS AND D	Change Change	DRS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE 11. 11. 11. 11. 11. 11. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and little if applicable IND DIRECTORS DELETE DRIVE DRIVE	rNOTE: Registered 13. 1.11 1.2N 1.3S 1.4C 2.11 2.2N 2.3S 2.4C 3.11 3.2N 3.3S	I Agont signature requires ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE ITLE	ed when reinstating)	DATE FICERS AND D	DIRECTO Change Change	ORS IN 12 Addition Addition
or registere familiar with SIGNATURE: 112. 11TLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and litle if applicable IND DIRECTIORS DELETE DRIVE DELETE DRIVE	rNOTE: Registered by the ries. 13. 1.11 1.2N 1.3S 1.4C 2.11 2.2N 2.3S 2.4C 3.11 3.2N 3.3S 3.4C	I Agont signature requires ITLE AME IREET ADDRESS ITY-ST-ZIP ITLE AME ITREET ADDRESS ITY-ST-ZIP ITLE ITHE	ed when reinstating)	DATE FICERS AND D	Change Change	DRS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE: 112. 11TLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and litle if applicable IND DIRECTIORS DELETE DRIVE DELETE DRIVE	rized by the release. 13. 1.17 1.2 N 1.3 S 1.4 C 2.11 2.2 N 2.3 S 2.4 C 3.11 3.2 N 3.3 S 3.4 C 4.11 4.2 N 4.3 S 4.3	I Agont signature requires ITLE AME ITREET ADDRESS ITY-ST-ZIP ITTLE AME ITREET ADDRESS ITY-ST-ZIP ITTLE	ed when reinstating)	DATE FICERS AND D	Change Change	DRS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE 112. 111LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authorction 607.0505, Florida Statut ent and litle if applicable IND DIRECTIORS DELETE DRIVE DELETE DELETE DELETE	rNOTE: Registerec 13. 1.17 1.2N 1.3S 1.4C 2.17 2.2N 2.3S 2.4C 3.11 3.2N 3.3.5 3.4.0 4.17 4.2N 4.3.5 4.4.0	I Agont signature requires ITLE AME IREET ADDRESS ITY-SI-ZIP IITLE AME ITREET ADDRESS ITY-SI-ZIP ITLE ITHE IT	ed when reinstating)	DATE FICERS AND D	Change Change Change	DRS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE SIGNATURE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authoriction 607.0505, Florida Statut ent and litle if applicable IND DIRECTIORS DELETE DRIVE DELETE DRIVE	rized by the release of the release	I Agont signature requires ITLE AME ITREET ADDRESS ITY-ST-ZIP ITITE AME ITREET ADDRESS ITY-ST-ZIP ITITE	ed when reinstating)	DATE FICERS AND D	Change Change	DRS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE 11. 11. 11. 11. 12. 11. 11.	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authorction 607.0505, Florida Statut ent and litle if applicable IND DIRECTIORS DELETE DRIVE DELETE DELETE DELETE	NOTE Registered 13.	I Agont signature requires ITLE AME ITREET ADDRESS ITY-ST-ZIP ITITLE AME ITREET ADDRESS ITY-ST-ZIP ITITLE	ed when reinstating)	DATE FICERS AND D	Change Change Change	DRS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE set 12. 11. 11. 11. 11. 11. 12. 11.	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authorction 607.0505, Florida Statut ent and litle if applicable IND DIRECTIORS DELETE DRIVE DELETE DELETE DELETE	NOTE Registered 13.	I Agont signature requires ITLE AME ITREET ADDRESS ITY-ST-ZIP ITITE AME ITREET ADDRESS ITY-ST-ZIP ITITE	ed when reinstating)	DATE FICERS AND D	Change Change Change	DRS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE set 12. 11TLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	DRIVE DELETE DELETE	NOTE Registered 13.	I Agont signature requires ITLE AME ITREET ADDRESS ITY-ST-ZIP ITITE AME ITREET ADDRESS ITY-ST-ZIP ITITE	ed when reinstating)	DATE FICERS AND D	Change Change Change	DRS IN 12 Addition Addition Addition Addition Addition
or registere familiar with SIGNATURE seamiliar with SIGNATURE seamiliar with SIGNATURE street address city-st-zip title name street address	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	prida. Such change was authorction 607.0505, Florida Statut ent and litle if applicable IND DIRECTIORS DELETE DRIVE DELETE DELETE DELETE	## Property of the control of the co	I Agont signature requires ITLE AME ITREET ADDRESS ITY-ST-ZIP ITITLE AME ITREET ADDRESS ITY-ST-ZIP ITITLE IT	ed when reinstating)	DATE FICERS AND D	Change Change Change	DRS IN 12 Addition Addition Addition
or registere familiar with SIGNATURE seamiliar with SIGNATURE seamiliar with SIGNATURE street address city-st-zip title name street address city-st-zip	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	DRIVE DELETE DELETE	## Property of the control of the co	I Agont signature requires ITLE AME ITREET ADDRESS ITY-ST-ZIP ITITE AME ITREET ADDRESS ITY-ST-ZIP ITITE	ed when reinstating)	DATE FICERS AND D	Change Change Change	DRS IN 12 Addition Addition Addition Addition Addition
or registere familiar with SIGNATURE seamiliar with SIGNATURE seamiliar with SIGNATURE street address city-st-zip title name	d agent, or both, in the State of Flo , and accept the obligations of, Se dignatura, typed or printed name of registered age OFFICERS A D CURRAN, JAMES 620 E CYPRESS POINTE PEMBROKE PINEES FL D CURRAN, JUNE 620 E CYPRESS POINTE	DRIVE DELETE DELETE	## Prized by the files. ## Prized by the files. 13.	I Agont signature requires ITLE AME ITREET ADDRESS ITY-ST-ZIP ITITLE AME ITREET ADDRESS ITY-ST-ZIP ITITLE IT	ed when reinstating)	DATE FICERS AND D	Change Change Change	DRS IN 12 Addition Addition Addition Addition Addition

centry that the information mongared on this entiremental properties in the and according and that my signature shall have the same legal effect as in made under oath; that I am an officer or directory of the corporation and that my name appears in Block 12 or Block 13 lychanged, or one attaching myth an address.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR