SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortnam ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (0) JACKSON BUSINESS ENTERPRISES, INC. Principal Place of Business Mailing Address 1759 N ANDREWS SQUARE 3720 NW 107 TERR CORAL SPRINGS FL 33065 FT LAUDERDALE FL 33311 3. Date Incorporated or Qualified 3a. Date of Last Report US 09/11/1992 03/09/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0355051 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Zio Country 8. This corporation has liability for intangible tax under s 199.032 24 29 30 Florida Statutes Yes 🔲 No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JACKSON, ROOSEVELT L., SR. 3720 NW 107 TERR 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL SPRINGS FL 33065** 83 84 City 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 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, and accept the obligations of, Section 607.0505, Florida Statutes. posevelt. ackson SIGNATURE (NOTE: Brig stered Agent signature required when reinstating) 12. ICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3.6)TITLE DELETE 1 1 TITLE Change Addition JACKSON, R.L., SR. NAME 1.2 NAME CR2E034 STREET ADDRESS 3720 NW 107 TERR 1.3 STREET ADDRESS **CORAL SPRINGS FL** CHTY-ST-ZIP 14 CITY - ST - ZIP TITLE DELETE 21 Title Change Addition NAME JACKSON, RUTH F. 2.2 NAME 3720 NW 107 TERR STREET ADDRESS 2 3 STREET ADDRESS CORAL SPRINGS FL CITY-ST-ZIP 2 4 CITY - ST - ZIF TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY - ST- ZIP 4.4 CHTY - ST-ZIP TITLE DELETE 51 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP TITLE DELETE 6 1 TITLE Change Addition 6 2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST- ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 617, Fiorida Statutes; and that my name appears in Block 12 or Block 13 if chapter 617, Fiorida Statutes. (954) 327 9838 **SIGNATURE**

NTED NAME OF SIGNING OFFICER OR DIRECTOR