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. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** JAGUAR SERVICES, INC. Principal Place of Business Mailing Address 8221 NW 66TH STREET 8221 NW 66TH STREET MIAMI FL 33166 MIAMI FL 33166 3a, Date of Last Report 3. Date incorporated or Qualified 10/07/1992 02/14/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0365228 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 **\$5.00** May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country This corporation has liability for intangible tax under s. 199 032 Zio Country Yes No Florida Statutes 29 30 24 25 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent ALENCAR, ROBERT 8221 NW 66TH STREET Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33166 83 Zip Code 84 City 85 608 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered both change was authorized by the corporation's board of directors. Thereby accept the appointment as registered oction 607.0505. Florida Statutes. Pursuant to the provisions of office or registered agent or agent Lamiltamiliar with ag SIGNATURE (96/E)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition ■ DELETE 1 1 TILLE TITLE ALENCAR, DIANE 2 NAME CR2E034 NAME 8221 NW 66TH STREET 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP DITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE ALENCAR, ROBERT 2.2 NAME 8221 NW 66TH STREET STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2 4 CiTY ST ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TUTLE TITLE 3.2 NAME NAME 3.3 STREET ADORESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 Title E TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City - ST- ZiP CITY - ST - ZIP Change Addition DELETE 61 TIFLE TITLE 6 2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 OUY - ST-ZIP CITY+S1-ZIP yoluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I sort or supplemental annual report is true and accurate and that my signature shall have the same legal effect as 1 ation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and 14. I do hereby certify that the information sugfurther certify that the information indic made unider eath, that I am an office that my name appears in Block PRESIDENT 18/JULY 96 SIGNATURE: