

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

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AND
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95 MAY 22 PH 2: 07

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**500001497905
-05/24/95--01028--026
****225.00 ****225.00**

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V72326 (4)
1. Corporation Name

Jennifer Smith Martin, Inc.

Principal Place of Business	Mailing Address
2455 East Sunrise Boulevard Penthouse South Fort Lauderdale, Florida 33304 US	2455 East Sunrise Boulevard Penthouse South Fort Lauderdale, Florida 33304 US

21. Principal Place of Business	22. Mailing Address
21 2455 East Sunrise Blvd. Suite, Apt. #, etc Penthouse South City & State Ft. Lauderdale, Florida Zip 33304 Country US	22 2455 East Sunrise Blvd. Suite, Apt. #, etc Penthouse South City & State Ft. Lauderdale, Florida Zip 33304 Country US

3. Date Incorporated or Qualified	3a. Date of Last Report
10/15/1992	02/16/1994
4. FEI Number	Applied For
65-0368899	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	\$5.00 May Be Added to Fees
6. Election Campaign Financing Trust Fund Contribution	☐
8. This corporation has liability for intangible tax under s. 199 USFL, Florida Statutes	☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**Schwenke, Kerry R.
1645 Palm Beach Lakes Blvd.
Suite 720
West Palm Beach, Florida 33401**

10. Name and Address of New Registered Agent

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

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 required to print name of registered agent and fee if applicable

Print Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	Martin Jennifer
STREET ADDRESS	2455 East Sunrise Boulevard, PHS
CITY ST ZIP	Ft. Lauderdale, Florida 33304

TITLE	
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	

TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY ST ZIP	

21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY ST ZIP	

31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	

41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	

51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	

61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not claim for the exemption stated in Section 199 07(b)(1), Florida Statutes. I further certify that the information indicated on this annual report or supplement 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 this corporation or the registered agent, and am empowered by the corporation to sign this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 as a change or addition to the corporation's officers and directors.

SIGNATURE:

Jennifer Martin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Jennifer Martin

5/10/95
DATE

(Signature)
SECRETARY OF STATE