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

**PROFIT** CORPORATION ANNUAL REPORT

1998



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

CHILLURA, JIMMY

TAMPA FL

TAMPA FL

TAMPA FL

TAMPA FL

2308 KATHLEEN ST

FAVATA, MARY ANN

2308 KATHLEEN ST

CHILLURA, SANDY A

2308 KATHLEEN ST

FAVATA, FRANK P.

2308 KATHLEEN ST.

OFFICERS AND DIRECTORS

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name 361392 (4)

JIMMY SOD COMPANY

Principal Pla	ice of Business	Mailing Address						
2308 KATHU TAMPA FL 3		2308 KATHLEEN TAMPA FL 3360	• -					
						DO NO		
						3. Date incorporated or C		
						03/20/1970		
2. Principal	Place of Business	2a. Mailing Addr	ess			4. FEI Number		
21		26				59-1288396		
Suite, Ap	t. #, etc.	Suite, Apt. #,	etc.		5. Certificate of Status Dea			
City & Sta	ate	City & State				6. Election Campaign Fina		
23		28				Trust Fund Contribution		
Zip	Country	Zip	c	ountry		8. This corporation owes		
24	25	29	30		Personal Property Tax			
	<ol><li>Name and Address of Cr</li></ol>	irrent Registered Agent				10. Name and Address of		
	AVATA, MARY ANN	81	Name					
	308 KATHLEEN ST AMPA FL 33607	82	Street Add	ress (P.O. Box Number is Not A				
	400 A 1 L 00001			83				
				84	City			
office or	nt to the provisions of Sections 607 registered agent, or both, in the sam familiar with, and accept the common sections.	State of Florida, Such char	ge was authoriz	above	e-named corp	poration submits this statemention's board of directors. I he		

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**FILED** Jan 23 1998 8:00am Secretary of State



									DQ	TON	WR	ΙΤΕ	IN TE	IIS S	SPA	CE					
				3. Date incorporated or Qualified																	
					03/	/20/	/19	70													
				4.	FEL	Nun	nber	•								L	F	٩pp	iied	For	
		<del></del>			59	9-1	288	839	<u>6_</u>							$\perp$	_	_		llcabl	е
				5. Certificate of Status Desired							\$	\$8.75 Additional Fee Required									
				· · · · · · · · · · · · · · · · · · ·								May Be i to Fees									
Country			8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. XYes \( \sum \) No																		
	<u> </u>			10.									jister						_		7
	81	Name						•													
	82	Street /	Addres	s (P	.O. B	Box I	Num	nber	is N	ot A	ccep	tabl	e)								
	83																				
	84	City											F	ΞL	8	5	Ziç	Co	ode		_
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14. I 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 chapped or on an attachment with an address.

6.2 NAME

**6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

TITLE

NAME

TITLE

NAME

CITY - ST - ZIP

CITY - ST - ZIP

12.

TITLE

NAME