PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M82474

1. Corporation Name

J & B MASON, INC.

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Mar 11, 1999 8:00 am
Secretary of State
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03-11-1999 90035 003 ***150.00



Principal Place o	of Business	Mailing Address							
2100 CONSTITUTE	ION BLVO.	P. O. 80X 6184							
SUITE 2 SUITE 2 SUITE 2 SUITE 2 VENICA FL 34292-0784						DO NOT W	RITE IN TH	S SPACE	
US	23.	US				3. Date Incorporated or Qualife	ed		
						05/20/1988			
2. Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number		A	pplied For
1		26				65-0058843		TN	tot Applicable
Suite, Apt. #,	elc.	Suite, Apt. #, etc.							Additional
2		27				5. Certifcate of Status Desired	L	Fee R	Required
City & State		City & State				6. Election Campaign Financin	а П	\$5.00	May Be
3		28				Trust Fund Contribution		_Added	to Fees
-Zio >	-Country	Zip	Cou	intry_		=8.=This corporation owes the c	urrent year l	ntangible	
4	25	29	30			Personal Property Tax.		Yes	□No
`	9. Name and Address of Current			T		10. Name and Address of New	w Registere	d Agent	
	a. Marie die Francisco			81	Name				
ROON	e, jeffrey a.			Ш		·····			
	AVENIDA DEL CIRCO			82	Street Addres	ss (P.O. Box Number is Not Acce	pæbie)		1
	E FL 34285			83					
VENUC	E FL 34203			83				_	
				84	City	,		85 Zip	Code
							F		
SCHATURE	the provisions of Sections 607.0502 istered agent, or both, in the State of familiar with, and accept the obligation of the control of the co	maion.			igniture required		Moer	7-1999	7.
2.	OFFICERS AND		13.			ADDITIONS/CHANGES TO	OFFICERS A	ND DIRECT	ORS IN 12
									
ne il	pn ng	☐ DELETE	1,1 TI	TLE	1			☐ Change	
	PD Magan william e	DELETE	1,1 TI					Change	
AME	MASON, WILLIAM E.	☐ DELETE	1.2 N	AME	nnaees	· · · · · · · · · · · · · · · · · · ·		Change	
AME	Mason, William E. 1001 Avenida del Circo	□ DELETE	1.2 N 1.3 S	AME TREET A	T T			Change	
AME TREET ADDRESS ITY-ST-ZIP	Mason, William E. 1001 Avenida del Circo Venice fl		1.2 N 1.3 S 1.4 G	AME TREET A TTY-ST-7	T T				Addition
AME TREET ADDRESS TY-SI-ZIP TILE	Mason, William E. 1001 Avenida del Circo Venice fl 80	☐ DELETE	1.2 N 1.3 S 1.4 C 2.1 Ti	AME TIREET A TIV-ST-Z TILE	T T			☐ Change	Addition
TREET ADDRESS TY-ST-ZIP TLE AME	MASON, WILLIAM E. 1001 AVENIDA DEL CIRCO VENICE FL SD MASON, JEAN G.		12 N 1.3 S 1.4 Q 2.1 TI 2.2 N	AME TIREET A TTY-ST-Z TITLE IAME	ZIP	,			Addition
TREET ADDRESS TY-SI-ZIP TILE TREET ADDRESS	MASON, WILLIAM E. 1001 AVENIDA DEL CIRCO VENICE FL SD MASON, JEAN G. 1001 AVENIDA DEL CIRCO		12 N 1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S	AME TREET A TTY-ST-Z TTLE TAME TREET A	ZIP LOORESS	,			Addition
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AME ITREET ADDRESS ITY-ST-ZIP TLE ITREET ADDRESS ITY-ST-ZIP	MASON, WILLIAM E. 1001 AVENIDA DEL CIRCO VENICE FL SD MASON, JEAN G. 1001 AVENIDA DEL CIRCO		12 N 13 S 14 G 21 T 22 N 23 S 2 4 G	TREET AL TTY-ST-Z TILE TAME TREET AL	ZIP LOORESS	,			Addition
AME TREET ADDRESS ITY-ST-ZP TILE STREET ADDRESS ITY-ST-ZIP TILE	MASON, WILLIAM E. 1001 AVENIDA DEL CIRCO VENICE FL SD MASON, JEAN G. 1001 AVENIDA DEL CIRCO VENICE FL	☐ OELETE	12 N 13 S 14 G 21 T 22 N 23 S 2 4 G	TREET AL TITY-ST-Z TITLE TAME STREET AL CITY-ST-	ZIP LOORESS	,		□ Change	Addition
AME TIREET ADDRESS ITY-S1-ZIP TITLE AME TIREET ADDRESS ITY-S1-ZIP TITLE TITLE TITLE AME	MASON, WILLIAM E. 1001 AVENIDA DEL CIRCO VENICE FL SD MASON, JEAN G. 1001 AVENIDA DEL CIRCO VENICE FL TD	☐ OELETE	12 N 1.3 S 1.4 G 2.1 Ti 2.2 N 2.3 S 2.4 G 3.1 Ti 3.2 N	TREET AL TITY-ST-Z TITLE TAME STREET AL CITY-ST-	ZIP ADDRESS ZIP			□ Change	Addition
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

SKINATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR