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

**PROFIT CORPORATION** ANNUAL REPORT

1999



Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FLORIDA DEPARTMENT OF STATE

Secretary of State 06-29-1999 90009 020 \*\*\*550.00

Jun 29, 1999 8:00 am

## DOCUMENT # P97000012482

<ol> <li>Corporation</li> </ol>	Name				
JEWEL E	QUITIES CORPORATION			***************************************	1861 - 21M11 - ATRAS - FETTA - (1987 - FAR)
Principal Place	of Business	Mailing Address		_	
8473 BAY COLONY DR 8473 BAY COLONY DR					
2001 2001			DO NOT WRITE IN THIS	SPACE	
NAPLES FL 34108-0728 US NAPLES FL 34108-0728 US			3. Date Incorporated or Qualifed		
00		<b>V</b>		02/07/1997	
2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For	
21		26		59-3431994	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27			\$5.00 May Be
City & State	3	City & State		6. Election Campaign Financing  Trust Fund Contribution	Added to Fees
Zip	Country	28	Country	8. This corporation owes the current year Interest.	
24	25		30	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Curren			10. Name and Address of New Registered	Agent
	L DIGILLADO E		81 Name		
HAHN, RICHARD F		82 Street Addre	ess (P.O. Box Number is Not Acceptable)		
8473 BAY COLONY DR #2001 NAPLES FL 34108			83		
<b>11/4</b> F1	LES FL 34100		03		
			84 City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-named corpo	pration submits this statement for the purpose of	changing its registered
office or r	egistered agent, or both, in the State of familiar with, and accept the obligation	of Florida. Such change was au tions of, Se¢tion 60₹.0505, Flori	thorized by the corporatio da Statutes.	IT'S BOARD OF DIRECTOR'S. THEREBY BOOCK the appoin	,,,,,,o,,, aa regione.v=
SIGNATURE	Kickend &	Harm Di	Registered Agent signature required		3 1999
40	Signature, typed or printed name of registered agen	nt and title if appticable. (NOTE: D DIRECTORS	Registered Agent signature required	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
12.	PT ·	DELETE	1.1 TITLE	, notified the second s	☐ Change ☐ Addition
NAME	HAHN, RICHARD F		1.2 NAME		•
STREET ADDRESS	8473 BAY COLONY DR #2001		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34108		1.4 CITY+ST-ZIP		
TITLE	VPS	☐ DELETE	2.1 TITLE	•	☐ Change ☐ Addition
NAME	HAHN, GINA D		2.2 NAME	•	÷
STREET ADDRESS	8473 BAY COLONY DR #2001		2.3 STREET ADDRESS		
CITY-ST-ZIP -	NAPLES FL-34108	· ·	2.4 CITY-ST-ZIP		Change Addition
TITLE	<b>,</b>	☐ DELETE	3.1 TITLE		
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
NAME		<u></u>	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
			6.3 STREET ADDRESS		

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.

6.4 CITY-ST-ZIP

**SIGNATURE:**