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

CORPORATION ANNUAL REPORT 1998

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

JILOTY COMMUNICATIONS, INC.

- 1 1884 | 1886 | 1886 | 1886 | 1886 | 1886 | 1886 | 1886 | 1886 | 1886 | 1886 | 1886 | 1886 | 1886 |

**FILED** 

Apr 09 1998 8:00am

Secretary of State

					<u> </u>	ABI) 31511 81811 81811 81871 1981
Principal Place of Business Mailing Address						
1510 RIDGEWOOD AVENUE 1510 RIDGEWOOD AVENUE						
HOLLY HILL FL 32117		HOLLY HILL FL 32117		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					08/08/1980	
2. Principal Place of Business 2a, Mailing Address			<del></del> -		4. FEI Number	Applied For
21		26		59-2016921	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		27 City & State			Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country		Zip Country				
24 25		29 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
<del>[=7]</del>	g, Name and Address of Curre		1997		10. Name and Address of New Registers	
JIL	OTY, MICHAEL J.		81	Name		
1510 RIDGEWOOD AVENUE			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
HC	DLLY HILL FL 32017		O. Street AC		areas (1.0. box number is not neceptable)	
			83			
			84	City		85 Zip Code
				,	rporation submits this statement for the purpose ation's board of directors. I hereby accept the s	·L   1
SIGNATURE	Signature, typed or profiled name of regularied as			ent signature requ	ulred when reinslating) DATI	
12.	OFFICERS AND DIRECTORS  DELETE		13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change
NAME	JILOTY, MICHAEL J.	Cotten	1.2 NAME			C) Onlings C Notition
STREET ADDRESS	1510 RIDGEWOOD AVE			T ADDRESS		
CITY-S1-ZIP	LOUVANIE		1.4 CITY-3			
TITLE		DELETE	2.1 TITLE	31 - ZN		☐ Change ☐ Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	T ADDRESS		
City-St-Zip			2.4 CITY-	ST-ZIP		
TITLE	☐ DELETE		3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME	1		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP	DELETE		3.4. CITY-	ST-ZIP	•	☐ Change ☐ Addition
TITLE		ן) טנננונ	4.1 TITLE			CHOINGS CHANGINGS
NAME STREET ADDRESS			4. 2 NAME	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE	☐ DELETE		5.1 TITLE	31-4IF		Change Addition
NAME			5.2 NAME			<del></del>
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY-			
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY CT 7ID			E A DOTY			

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.

1 April 1998

904/677-0673