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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000001437

JOHN S. FRYBERGER INC.

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90183 035 ***150.00



Principal Place	e of Business	Mailing Address				
8622 S.E. ROY/	al street	8622 S.E. ROYAL STREET				
HOBE SOUND	FL 33455	HOBE SOUND FL 33455		DO NOT WRITE IN	THIS SPACE	
				3. Date Incorporated or Qualifed	THIO OF AGE	
				03/23/1993		ł
6 Division 10	N	2a Mailing Address		4. FEI Number	Ann	lied For
2. Principal P	Place of Business 470 Beach Rd	2a. Mailing Address	mal Dal	73-1157734	<u> </u>	Applicable
21 / 7		26 7670 De Suite, Apt. #, etc.	aren Va	73-1137734	\$8.75 A	
Suite, Apt.	.#, etc. ## 7 //L	27 # 3/4		5. Certifcate of Status Desired	Fee Req	
City & Stat	74 314	City & State		6. Election Campaign Financing	\$5.00 Å	Agy Do
City & Stat	Supiter +L	28 Jupiter	FL	Trust Fund Contribution	Added to	
Zìp	Country	Zip	Country	8. This corporation owes the current ye		Maria I
24 <i>334</i>			Palm Beau			No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Regis	tered Agent	
EDV	PERCER ICHN		81 Name	tryberger, John		
FRYBERGER, JOHN 82 Street Addre				ddress (P.O. Box Number is Not Acceptable)	<u> </u>	
8622 S.E. ROYAL STREET				70 Beach Kd 1	# 3 	
HOB	BE SOUND FL 33455		83		-	
			84 City I		85 <u>Zip C</u>	ode.
			الا	piter	FL 35	464 L
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named co	orporation submits this statement for the purp	ose of changing its r	egistered
office or r	registered agent, or both, in the State of im familiar with, and accept the obligation	Florida, Such change was auth ons of, Section 607.0505, Florida	a Statutes	ation's board of directors. I hereby accept the	/ /	1510100
-	John Fryber		Johns	Juleval.	1/19/99	1
SIGNATURE	Signature, typed or printed name of registered agent a	rib title if applicable. (NOTE: Re	istered Agent signature req		ATIE:	
12.	OFFICERS AND	DIRECTORS //	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	
TITLE	P	☐ DELETE	1.1 TITLE	Floren Labor E	Change	Addition
NAME	FRYBERGER, JOHN S		: 1.2 NAME	Fryberger, John S.		
STREET ADDRESS	8622 S.E. ROYAL STREET		13 STREET ADDRESS	19670 Beach Rd#	314	
CITY+ST-ZIP	HOBE SOUND FL 33455		1.4 CITY-ST-ZIP	Jupiter FL 339	<i>+</i> 69	
TITLE	S	☐ DELETE	2.1 TITLE	Eryberger, Judy 19670 Beach RL#	H Change	☐ Addition
NAME	FRYBERGER, JUDY		2.2 NAME	Fryberger		
STREET ADDRESS	AAAA A.E. BAYYY ATREET		2.3 STREET ADORESS	19670 Beach Kd	314	
CITY-ST-ZIP	HOBE SOUND FL 33455		2. 4 CITY-ST-ZIP	Jupiter FL 33	3469 _	
TITLE	THOSE GOOKS TE GO TO	☐ DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			ļ
STREET ADDRESS			3.3 STREET ADDRESS			1
CITY-ST-ZIP			3.4. CITY-ST-ZIP]
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			1
			4.4 CiTY-ST-ZiP			
CITY-ST-ZIP TITLE		☐ DELETE	51 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition
			5.2 NAME		_ ·	
NAME			5.3 STREET ADDRESS			1
STREET ADDRESS			5.4 CITY-ST-ZIP			
CITY-ST-ZIP		DELETE	6.1 TITLE		☐ Change	Addition
TITLE		☐ nerele	6.2 NAME			
NAME			6.3 STREET ADDRESS			
STREET ADDRESS			E N 3 STREET ADORESS I			I

6.4 CITY-ST-ZIP 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 chapter 607 and attachment with an address, with all other like empowered.

SIGNATURE: