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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

, ,, ,, ,	1999	DIVISION OF CO	RPORATIONS	03-02-1999 90049 0	38 ***150.00
DOCUI	MENT # G74378	3			
OT HAT OF	ocomina, mo				
Principal Place	of Business	Mailing Address		T INRUINI DON IORNI DIRAN INIK IORRI IRRI DIDIN	910(B10(018(910(010(100)
J.R.M. OF SEBRING, INC. J.R.M. OF SEBRING, INC.					
230-0 COMMERCE AVE			DO NOT WRITE IN THIS	S SPACE	
SEBRING FL 33870 US SEBRING FL 33870 US		SEBRING FL 08071-0591		3. Date Incorporated or Qualifed	7017102
US				12/12/1983	
2. Principal P	lace of Business .	2a. Mailing Address		4. FEI Number	Applied For
21 254		26 2543 W	5 27 Sour	た 59-2373948	. Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Stat	e	City & State	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip Zip	Country	8. This corporation owes the current year in	ntangible
24	25	29 33870 3	』 ÚSH	Personal Property Tax.	☐Yes ☐No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	l Agent
	ממשט משט משט משט משט משט מ		81 Name		
MACBETH, JOSEPH ROSS MACBETH, JOSEPH, ROSS			82 Street A	Address (P.O. Box Number is Not Acceptable)	
2543 US 27 S			83		
SEBRING FL 33870					
-			84 City	FI .	85 Zip Code
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statutes of Florida. Such change was autitions of, Section 607.0505, Florid	, the above-named on the corporate statutes.	corporation submits this statement for the purpose or ration's board of directors. I hereby accept the appo	intment as registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE: R	egistered Agent signature re	quired when reinstating) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTD	☐ DELETE	1.1 TITLE	·	Change
NAME	MACBETH, JOSEPH ROSS		1.2 NAME 1.3 STREET ADDRESS	2543 US. 27 San	eth
STREET ADDRESS	-230 S COMMERCE SEBRING, FL -00000		1.3 STREET ADDRESS		33870
CITY-ST-ZIP	S SEDNING, FL-00000	☐ DELETE	2.1 TITLE		Change Addition
NAME	MACBETH, ROBERT MARK		2.2 NAME		
STREET ADDRESS	230 S COMMERCE		2.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING, FL 90000-	·	2.4 CITY-ST-ZIP		33870
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP		□ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
TITLE		[] SECELE	4.1 TITLE		
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		<u> </u>	5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	6.1 TITLE 6.2 NAME	•	
NAME STREET ADDRESS			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 appetition of the corporation of the receiver of the corporation of the receiver of trustee empowered.

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SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

OFFICER OR DIRECTOR