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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

H31549

(9)

J.D.R. TECHNICAL SERVICES CORPORATION

FILED Apr 24 1998 8:00am Secretary of State

Delegate at Otro-							
Principal Plac		Mailing Address					11217 1021
C/O DARRYL 779 CO RD 4		C/O DARRYL RICHIE 779 CO RD 488					
OXFORD FL 34484		OXFORD FL 34484			DO NOT WRITE IN THIS SPACE		
US		US			3. Date Incorporated or Qualified		***
		·			11/26/1984		
· ·	lace of Business	2a. Mailing Address			4. FEI Number	App	lied For
Suite, Apt.	# atc	26			59-2469058		Applicable
22	#, 0 16.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Ad Fee Requ	
City & State	8	City & State			6. Election Campaign Financing	\$5.00 M	
23		28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	y	8. This corporation owes or has paid the	current year Intar	ngible
24	25	29	30		Personal Property Tax due June 30.	Yes 🗌	No
840	9. Name and Address of Curre	ent Hegistered Agent	81	Name	10. Name and Address of New Register	ed Agent	
	HIE, DARRYL		6'	Name			
	CO RD 448		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
UA	FORD FL 34484		83				
			64	City	F	B5 Zip Co	ode
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the abov	e-named corp	poration submits this statement for the nurnes	o of changing its	registered
agent. 1 a	m familiar with, and accept the obli	gations of, Section 607,0505, Fl	autnorized bi Iorida Statute	y the corporat s.	tion's board of directors. I hereby accept the	appointment as re	gistered
SIGNATURE							
	Signature, typod or printed name of registered a			ent signature requir	red when reinstating) DAT		
12.	PV\$T	ND DIRECTORS DELETE	13.	·	ADDITIONS/CHANGES TO OFFICERS A		
NAME	RICHIE, J. DARRYL	Ottell	1.1 TITLE			L. Change	☐ Addition
STREET ADDRESS	779 CO RD 466		1.2 NAME				
CITY-ST-ZIP	OXFORD FL		1.3 STREET				
TITLE		DELETE	2.1 TITLE	51- ZIP		Change	Addition
NAME			2.2 NAME	1			
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP			2. 4 CiTY-1	ST-ZIP			
TETLE		☐ DELETE	3.1 TITLE	·		☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change [☐ Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP		T POLITIC	4.4 CITY - S	IT-ZIP			
TITLE		∐ DELETE	51 TITLE			Change	Addition
NAME DIDECT ADDOCCC			5.2 NAME				
STREET ADDRESS			5.3 STREET	ł			
TITLE		DELETE	5.4 CITY-S 61 TITLE	3- ZIP		Change [Addition
NAME		LL OCCUP	6.2 NAME			Li change t	Addition
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			6.3 SYREET 6.4 CITY - S				
14. I hereby co	ertify that the information supplied	with this filing does not qualify for	or the exemp	tion stated in t	Section 119.07(3)(i), Florida Statutes. I further	certify that the inf	formation
officer or o	on this annual report of sunniement	ial annual report is true and acc seiver or trustee empowered to	rurete and the	at my eignatur	re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and the	under eath, that I	lam on