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FILED
Mar 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H34014 (1)

1. Corporation Name
JIFFY BILLBOARDS, INC.

Principal Place of Business
170 W FAIRBANKS AVE #203
PO BOX 847
WINTER PARK FL 32789

Mailing Address
450 E LAS OLAS BLVD
SUITE 1200
FT LAUDERDALE FL 33301
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
12/13/1984

4. FEI Number
59-2488270

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 110 S.E. 6th Street

Suite, Apt. #, etc.

27 20th Floor

City & State

28 Fort Lauderdale, FL

Zip

29 33301

Country

30 US

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME HUDSON, HARRIS W
STREET ADDRESS 450 E LAS OLAS BLVD., SUITE 1200
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ DELETE

VS
NAME COLE, JAMES O
STREET ADDRESS 450 E LAS OLAS BLVD., SUITE 1200
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ DELETE

P
NAME HUIZENG JR., H. WAYNE
STREET ADDRESS 450 E LAS OLAS BLVD., SUITE 1200
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ DELETE

T
NAME HYLE, KATHLEEN
STREET ADDRESS 450 E LAS OLAS BLVD., SUITE 1200
CITY-ST-ZIP FT LAUDERDALE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 110 S.E. 6th Street, 20th Floor
1.4 CITY-ST-ZIP Fort Lauderdale, FL 33301

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 110 S.E. 6th Street, 20th Floor
2.4 CITY-ST-ZIP Fort Lauderdale, FL 33301

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 110 S.E. 6th Street, 20th Floor
3.4 CITY-ST-ZIP Fort Lauderdale, FL 33301

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS 110 S.E. 6th Street, 20th Floor
4.4 CITY-ST-ZIP Fort Lauderdale, FL 33301

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 changed, or on an attachment with an address.

SIGNATURE

James O. Cole 2/17/98 954-769-7221

CR2E034 (10/97)