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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # H41801

JUST MAE, INC.

FILED Jan 26, 1999 8:00am **Secretary of State**

01-26-1999 90047 048 ***150.00



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Principal Place of Business Mailing Address					D	#1811 BIBIT 1881	
2250 LAGOON DR.		2250 LAGOON DR.	2250 LAGOON DR.				
DUNEDIN FL 34698-2530		DUNEDIN FL 34698-2530		DO NOT WRITE IN THIS SPACE			
		•			3. Date Incorporated or Qualifed		
					02/08/1985		
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ap	pplied For
26				59-2466449	No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		14.4	5. Certifcate of Status Desired	•	Additional
22		27			5. Certificate of Status Desired	Fee Re	equired
City & Stat	te	City & State			6. Election Campaign Financing		May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country		8. This corporation owe's the current year		
24	25	29	30		Personal Property Tax.	Yes	□No
	9. Name and Address of C			Mana	10. Name and Address of New Registe	rea Agent	
CEL	IEDO MADDY I	, aug. 1,	81	Name			
	LERS, HARRY J. D LAGOON DR.		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	VEDIN FL 33528		-		*** ** * * **** **** *** *** *** *** *	en e	018 4.00 (100) 0100 (4.00 (100)
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		,	84	City		85 Zip	Code
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office or	registered agent or both in the '	State of Florida: Such channe Wa	as authorized by	e-named corp the comorati	poration submits this statement for the purpos on's board of directors. I hereby accept the a	ppointment as re	egistered
 agent. I a 	am familiar with, and accept the	obligations of, Section 607.0505,	Florida Statutes	,			
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s agent. I a	am familiar with, and accept the o	obligations of, Section 607.0505, red agent and title if applicable.	FIORIDA STATUTOS	•	ed when reinstating) A Processing DATI	E	
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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, with all other like empowered.

SIGNATURE: