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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J05938

(2)

JACK D. FITCH, INC.

FILED Feb 10 1998 8:00am Secretary of State

57.51. 5					
Principal Place	of Business	Mailing Address			ginii nimii minii nimii nikii nihii indi
1117 NORTH AVE 1117 NORTH AVENUE					
SUITE 101 SUITE 101		* * * - *		DO NOT HIDITE IN THE COACE	
MAITLAND FL 32751 MAITLAND FL 32751 US US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
08		03		03/24/1986	
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2664			SIQN CT.	59-2666595	Not Applicable
Suite, Apt.	r, etc.	Suite, Apt. #, etc.	3.3	I .	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	~ \ -	City & State		6. Election Campaign Financing	\$5.00 May Be
23 2 9 L	neorg, Fl	28 San Ford	<u>, </u>	Trust Fund Contribution	Added to Fees
س _ک نگ س	Country		Country	8. This corporation owes or has paid	
24 <u>J</u>	g. Name and Address of Current	[29] 3 3 3 3 3 3 3	USA	Personal Property Tax due June 3 10. Name and Address of New Reg	
- FDY		registered Agent	81 Name	10. Name and Address of New Hog	Istereo Ageni
PHON, JAON U.					
108 KYLE DR MAITLAND FL 32751			82 Street Address (P.O. Box Number is Not Acceptable)		
MIN	IILANO PL 32/31		83		
			84 City		FL 85 Zip Code
4. Described in the property of the property o					
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					
Stream or based or treated transport party and bite if quality ability (NV) It. Registered Agent signature required when reinstalling (NV)					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD		.1 TITLE		☐ Change ☐ Addition ☐
NAME	FITCH, JACK D.		.2 NAME		3[
STREET ADDRESS	2150 MARKHAM WOODS RD.		3 STREET ADDRESS		Į
CITY-ST-ZIP	LONGWOOD FL		4 CITY - ST - ZIP		Change Addition
TITLE	FITCH, JANICE		1 TITLE		
NAME	2150 MARKHAM WOODS RD.		3 STREET ADDRESS		
STREET ADDRESS	LONGWOOD FL		2 4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	ST		ST TITLE		Change Addition
NAME	FITCH, DUSTIN H.		32 NAME		
STREET ADDRESS	419 N. SHINE AVE.		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORALNDO FL		4. CITY-ST-ZIP		·
TITLE			I TITLE		Change Addition
NAME			2 NAME		1
STREE1 ADORESS			1.3 STREET ADDRESS		
CITY-ST-ZIP			1.4 CITY-ST-ZIP		
TITLE		DELETE	S.1 TITLE		Change Addition
NAME			5.2 NAME		<u></u>
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME		6	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP			5.4 CITY-ST-ZIP	0	with an actific that the left constitution
14. I hereby of indicated	certify that the information supplied will on this armual report or supplemental) this ning does not qualify for the annual report is true and accurate	exemption stated in and that my signature	Section 119.07(3)(i), Florida Statutes. I free shall have the same legal effect as if	made under oath; that I am an

or trustive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an address.