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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J63390

(5)

JERSEY SCOOPS, INC.

Mailing Address Principal Place of Business THE LEGAL CAFE 7503 CARISSA 210 TAYLOR STR **PUNTA GORDA FL 33955** DO NOT WRITE IN THIS SPACE PUNTA GORDA FL 33950 3. Date Incorporated or Qualified 03/24/1987 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For Not Applicable 59-2788782 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 28 Trust Fund Contribution Added to Fees Country Zip Country ZiD 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name KUELLING. MARK 7503 CARISSA Street Address (P.O. Box Number is Not Acceptable) **PUNTA GORDA FL 33955** 83 84 City 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 present manua of registered agend and title diapplicable (NOTE Registered Agent signature required whon reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition KUELLING, MARK 1.2 NAME NAME 7503 CARISSA 1.3 STREET ADDRESS STREET ADDRESS **PUNTA GORDA FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 21 TITLE TITLE KUELLING, MARK 2.2 NAME NAME 7503 CARISSA 2.3 STREET ADDRESS STREET ADDRESS **PUNTA GORDA FL** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE NAME 5.2 NAME

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 arrival 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 of the security of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the security of t

61 TITLE

62 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

MARK KUELLING

5.3 STREET ADDRESS 5.4 City-St-Zip

6.3 STREET ADDRESS 6.4 City-St-Zip

2-5-98

94/6370700

Change

Addition

FILED

Feb 11 1998 8:00am

Secretary of State