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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K86004

THE J. T. BUTWIN CORPORATION

FILED Feb 09, 1999 8:00am **Secretary of State**

02-09-1999 90030 013 ***150.00



(Viliopai) las	e of Business		Mailing Address			T I MANANTH WAS INCHEM WEIGH MANNEN AND MANN	MIC M: MC MINEL MINEL	#1911 91811 19E1
2424 NOOTH C	•		· -			•		
2424 NORTH FEDERAL HIGHWAY #300			2424 N. FEDERAL HWY #300					
BOCA RATON FL 33431			BOCA RATON FL 33431		DO NOT WRITE IN THIS SPACE			
US	•		US			3. Date Incorporated or Qualifed 05/05/1989		
2. Principal F	Place of Business	1	2a. Mailing Address			4. FEI Number	Ap	plied For
21		· .	26			11-2799062	· No	ot Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			<u> </u>	\$8.75	Additional
22		ļ .	27		•	5. Certificate of Status Desired	•	equired
City & Sta	te		City & State			6. Election Campaign Financing	\$5.00	May Be
23		ļ.	28			Trust Fund Contribution		to Fees
Zip Zip	Coi	intry	Zip	Cour	ntrv	8. This corporation owes the current year		
24	25	` 	29	30	,	Personal Property Tax.	☐ Yes	No
24 :		dress of Current Re		. 1301		10. Name and Address of New Register		ZX
led to	5. Name and Ac	oress of Carrent No	sgistered Agent		81 Name	IV. Hame and Address of Non Register	ou rigoni	•
RIT	WIN, JEROME T.				o i i i i i i i i i i i i i i i i i i i			
	4 N. FEDERAL HW	V			82 Street Addr	ess (P.O. Box Number is Not Acceptable)		
#30						3 10 4 143 - 144 - 145 - 146 -	*** **** * *** 3 ****	No. 20 Car Star Star
					83	一		
DUL	CA RATON FL 334	31		-	84 City	18-13 _ M 1,03 % had by M 2 had b	85 Zip	Code
							▀ L `│	
11. Pursuant	to the provisions of	Sections 607.0502 ar	nd 607.1508, Florida Statu	ites, the at	ove-named corp	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	e of changing its	registered
Oπice or i	registered agent, or t am familiar with, and	otn, in the State of F accept the obligations	s of, Section 607.0505, Flo	orida Statu	tes.	on a board of directors. Thereby accept the ap	pontinent as re	gistered
SIGNATURE			35			•		
SIGNATURE	Signature, typed or printed	name of registered agent and	title if applicable. (NOT	E: Registered	Agent signature require	d when reinstating). DATE		
12.		OFFICERS AND D	IRECTORS	13.	•	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 12
TITLE	DP		☐ DELETE	1.1 TIX	LE	and the state of t	☐ Change	☐ Addition
NAME	BUTWIN, JERON	IE T.		1.2 NA	MĒ.			
STREET ADDRESS	2424 N. FEDER/	HWY SUITE 3	00		·			
CITY-ST-ZIP	BOCA RATON F		UU .	1.3 ST	REET ADDRESS	· .		
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TILE.			UU .	1.4 CiT	Y-ST-ZIP		Change	Addition
HILE Id s	DS	L		1.4 CiT 2.1 TIT	Y-ST-ZIP LE		Change	Addition
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NAME. STREET ADDRESS	DS BUTWIN, FRANC 2424 N. FEDER/	L XINE AL HWY., SUITE 30	☐ DELETE	1.4 Cit 2.1 Tif 2.2 NAI 2.3 ST	Y-ST-ZIP LE ME REET ADDRESS		Change	Addition
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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

561.391.8811