

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 18, 2004 8:00 am
Secretary of State

03-18-2004 90005 004 ***158.75

DOCUMENT # K94765

1. Entity Name

JSM INCORPORATED



Principal Place of Business

1120 VIRGINIA AVE
PALM HARBOR FL 34683
US

Mailing Address

1120 VIRGINIA AVE
PALM HARBOR FL 34683
US

54019147



MOORE

CR2E034 (11/03)

2. Principal Place of Business

90 S. Highland Ave
Suite, Apt. #, etc.
#1107

3. Mailing Address

1324 Seven Springs Blvd
Suite, Apt. #, etc.
#307

City & State

tarpon Springs FL
Zip 34689 Country USA

City & State

Newport Richey FL
Zip 34655 Country USA

4. FEI Number

65-0121809

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRESLIN, JENNIFER K.
1120 VIRGINIA AVE
PALM HARBOR FL 34683

7. Name and Address of New Registered Agent

Name Jennifer Breslin
Street Address (P.O. Box Number is Not Acceptable)
90 S. Highland Ave #1107
City tarpon Springs FL Zip Code 34689

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP
NAME BRESLIN, JENNIFER K
STREET ADDRESS 1120 VIRGINIA AVE
CITY-ST-ZIP PALM HARBOR FL 34683 ☐ Delete

TITLE V
NAME BRESLIN, RICHARD A.
STREET ADDRESS 1120 VIRGINIA AVE
CITY-ST-ZIP PALM HARBOR FL 34683 ☐ Delete

TITLE S
NAME BRESLIN, RICHARD A
STREET ADDRESS 1120 VIRGINIA AVE
CITY-ST-ZIP PALM HARBOR FL 34683 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP Jennifer Breslin ☒ Change ☐ Addition
NAME
STREET ADDRESS 90 S. Highland Ave #1107
CITY-ST-ZIP tarpon Springs FL 34689

TITLE V. Richard Breslin ☒ Change ☐ Addition
NAME
STREET ADDRESS 90 S. Highland Ave #1107
CITY-ST-ZIP tarpon Springs FL 34689

TITLE S. Richard Breslin ☒ Change ☐ Addition
NAME
STREET ADDRESS 90 S. Highland Ave #1107
CITY-ST-ZIP tarpon Springs FL 34689

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with an officer like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Richard Breslin 3-16-04