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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90109 026 \*\*\*150.00

## DOCUMENT # L30197

Principal Place of Business

J J.B.D. ENTERPRISES, INC.

7620 GUNN HIGI	HWAY	7620 GUNN HIGHWAY					
SUITE 130 CITRUS PARK FL 33625		SUITE 130 CITRUS PARK FL 33625		DO NOT WRITE IN THIS SPACE .			
CITRUS PARK FI	L 33025	OTHER PAINTE SOCES			3. Date Incorporated or Qualifed		
					12/15/1989		
2 Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
¬ `	acc of Basimoss	26			59-2984467		Not Applicable
Suite, Apt. #	# etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	<b>v</b>	75 Additional
22	.,	27			3. Certificate of Claude Book of	Fe	e Required
City & State	3	City & State			6. Election Campaign Financing		.00 May Be
23		28			Trust Fund Contribution	Add	ded to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current		
24	25	29	30		Personal Property Tax.	☐Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent_	
				81 Name		•	
DRAPER, JOHNATHON B.				82 Street Address (P.O. Box Number is Not Acceptable)		3)	
	HUMBOLDT						
NEW	PORT RICHEY FL 34655			83			•
				84 City		85	Zip Code
				i   1		FL	·
11 Dursuant t	to the provisions of Sections 607.0502	and 607,1508, Florida S	tatutes, the a	bove-named corp	poration submits this statement for the pu	rpose of changin	ig its registered
	egistered agent, or both, in the State o m familiar with, and accept the obligati				on's board of directors. I hereby accept t	ne appointment	15 regionores
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable	(NOTE: Registered	Agent signature require	ed when reinstating)	DATE	
	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
12.	PD	☐ DELET	E 1.1 T	MLE		☐ Cha	ECTORS IN 12
TITLE	DRAPER, JOHNATHAN B.		1.2 N	AME			
NAME	_			TREET ADDRESS			Į.
STREET ADDRESS	7620 GUNN HIGHWAY S-130			STY-ST-ZIP			
CITY-ST-ZIP	CITRUS PARK FL	☐ DELET				Cha	ange Addition
TITLE	STD POEMBA K		2.2 N	1		e a <del>a const</del> ensión de la constantina	2.77
NAME	DRAPER, BRENDA K. 7620 GUNN HIGHWAY S-130			1			
STREET ADDRESS							l l
•				TREET ADDRESS	•		\ .
CITY-ST-ZIP	CITRUS PARK FL	□ DELET	2.40	CITY-ST-ZIP		☐ Cha	ange Addition
		☐ DELET	2.40 TE 3.1 T	CITY-ST-ZIP		☐ Cha	ange Addition
CITY-ST-ZIP		☐ DELE?	2.4 ( TE 3.1 T 3.2 N	CITY-ST-ZIP TTLE IAME	·	Cha	ange Addition
CITY-ST-ZIP		☐ DELET	2.40 FE 3.1 T 3.2 N 3.3 S	CITY-ST-ZIP  TITLE  IAME  STREET ADDRESS	·	☐ Cha	ange Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELET	2.40 FE 3.11 32 N 3.3 S 3.4.6 TE 4.11	CITY-ST-ZIP  TITLE  IAME  STREET ADDRESS  CITY-ST-ZIP  TITLE			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			2.40 FE 3.17 32 N 3.3 S 3.4.6 TE 4.17 4.21	CITY-ST-ZIP  ITLE  IAME  STREET ADDRESS  CITY-ST-ZIP  ITLE  NAME			
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	CITRUS PARK FL	☐ DELET	2.440 3.1 TE 3.1 TE 4.1 TE 4.1 TE 4.2 TE 4.3 \$ 4.40 TE 5.1 TE 5.1 TE 5.3 TE 6.1 TE 6.1 TE 6.3 TE	CITY-ST-ZIP  ITLE  IAME  STREET ADDRESS  CITY-ST-ZIP  ITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  VAME  STREET ADDRESS		Ch	ange Addition
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