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

PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT #

1. Corporation Name JU BOIS, INC.



L51557

FLORIDA DEPARTMENT OF STATE

156

Katherine Harris

Secretary of State

DIVISION OF CORPORATION\$

FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90060 012 ***150.00



Principal Place	e of Business	Mailing Address		(/poston an austrinae) duar dithi šani osak asati osak osak anki anak anak
3301 RALEIGH		3301 RALEIGH ST		
UNIT C		UNIT C		DO NOT IMPLIE IN THIS SPACE
HOLLYWOOD F	FL 33021-3135	HOLLYWOOD FL 33021-3135		DO NOT WRITE IN THIS SPACE
	•			3. Date Incorporated or Qualifed 02/20/1990
2. Principal P	lace of Business	2a. Mailing Address -		4. FEI Number Applied For
21		26		59-2994607 Not Applica
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired
22	·	27		
City & Stat	e ·	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zíp	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 3	10	Personal Property Tax. Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
COL	DBERG, THEODORE		81 Name	
	I RALEIGH ST		82 Street Add	dress (P.O. Box Number is Not Acceptable)
UNI			83	
HOL	LYWOOD FL 33020			
			84 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the above-named cor	poration submits this statement for the purpose of changing its registere
l office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	e of Florida. Such change was aut	horized by the corporat	ion's board of directors. I hereby accept the appointment as registered
	Ti tattillar with, and accept the congr	340,10 01, 0001011 001.0000, 110.11		
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: R	Registered Agent signature requir	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13
TITLE	VP	☐ DELETÉ	1.1 TITLE	☐ Change ☐ Add
NAME	GOODMAN, CAROL J		1.2 NAME	
STREET ADDRESS	3301 RALEIGH ST.			
CITY-ST-ZIP			1.3 STREET ADDRESS	
	HOLLYWOOD FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Change Add
TITLE	HOLLYWOOD FL D	[] DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	☐ Change ☐ Ado
NAME	HOLLYWOOD FL D GOODMAN, CAROL J.	[] DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	☐ Change ☐ Add
	HOLLYWOOD FL D GOODMAN, CAROL J. 3301 RALEIGHT ST.	[] DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	☐ Change ☐ Add
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CITY-ST-ZIP 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 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 empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or one partiachment with an address with all other like empoyered.

6.4 CITY-ST-ZIP

SIGNATURE: