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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

L53437

(4)

JACQUELINE B. PEPPER P.A.

**FILED** 

May 15 1998 8:00am

Secretary of State

incipal Place of Business	Mailing Address	1 !
% JACQUELINE B. PEPPER	% JACQUELINE B. PEPPER	

% JACQUELINE B. PEPPER 10720 NW 18 CT CORAL SPRINGS FL 33071		10720 NW 18 CT CORAL SPRINGS FL 3	CORAL SPRINGS FL 33071		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  02/23/1990			
2. Principal Place of Business 2a. Mailing Address				4. FEI Number Ap		oplied For		
21 26					65-0176120	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	0	City & State	City & State		6. Election Campaign Financing	\$5.00	May Be	
23					Trust Fund Contribution	Added		
Zip	Country	Zip	Countr	У	8. This corporation owes or has paid the c		'	
24	25 25 Name and Address of Cur	rent Registered Agent	30	0 Personal Property Tax due June 30. No 10. Name and Address of New Registered Agent				
		rent registered rigerit	81	Name	10, Harrie dilo Address Or Hear Hogistere	a Agont		
PEPPER, JACQUELINE B.								
10720 NW 18 CT CORAL SPRINGS FL 33071			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
U	VINE OF THIS OF COURT		83		A			
				Cav		——————————————————————————————————————	Codo	
			84	City	F	85 Zip (	Code	
11. Pursuant office or reagent. La	to the provisions of Sections 607.0 egistered agent, or both, in the St m familiar with, and accept the ot	0502 and 607.1508, Florida Statu ale of Florida. Such change was oligations of, Section 607.0505, Fl	tes, the abov authorized b orida Statute	re-named cor y the corpora s.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing it ppointment as	s registered registered	
SIGNATURE								
	Signature, typed or printed name of registered	Lagent and tille if applicable (NO AND DIRECTORS		ent signature requ	uired when teinstating)  DATE  DATE			
12.	D OFFICERS.	AND DIRECTORS  DELETE	13. 1.1 TiTLE		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
NAME	PEPPER, JACQUELINE B	—				onungo		
STREET ADDRESS	10720 NW 18 CT	•		T ADDRESS				
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 Cily-					
TITLE		☐ DELETE	2.1 TITLE			Change	☐ Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	T ADDRESS				
CITY-ST-ZIP			2. 4 CITY -	ST-ZIP				
TITLE		☐ DELETE	3.1 TILLE			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4 CITY-	ST-ZIP				
TIFLE		☐ DELETE	4.1 T(TL€			Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS				T ADDRESS				
CITY- & I - ZIP		T essere	4.4 CITY -	ST-ZIP		1 05	1,00000	
TITLE		☐ DELETE	5.1 TITLE			L Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CITY -	ST-ZIP		Change	Addition	
TITLE		☐ VELETE	6.1 TITLE			L. Change		
NAME			6.2 NAME	1 40000000				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			6.4 CITY -	SI-ZIP				

14. Thereby 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE ACCOUNTY TEACH Jacqueline Perper 41798 254.345-2292

CR2E034 (10/97)