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

DOCUMENT # L60349

1. Corporation Name

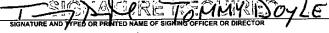
Principal Place of Business

JACQUES DOYLE, INC.

% JACQUES DOYLE 4412 VAN BUREN ST HOLLYWOOD FL 33021 US		% THOMAS DOYLE 4421 VAN BUREN ST HOLLYWOOD FL 33021 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/22/1990			
2. Principal Pl	ace of Business	2a. Mailing Address			1	FEI Number			oplied For
21		26				<u>65-0349645</u>			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	¬ '''			5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State		City & State	<u> </u>			Election Campaign Financing	3 _	\$5.00	May Be
23 May - Land Ser and Service at Service (1997) 1 May 18 M		28	مایون <u>مستندها</u> و ی دران پریستوی همستوی [.Trust:Fund:Contribution		Added	to Fees
Zip Country		Zip	Zip Country		8.	This corporation owes the cu	rrent year Inta	angible ,	
24	25 29 3		30	0		Personal Property Tax.	·	Yes	No
		·	10.	Name and Address of New	Registered /	Agent			
	9. Name and Address of Curr			81 Name	е				
DOY	le, thomas		82 Street Add		4 Add (D	A.O. Day Number is Not Asses	etable)		
4412	VAN BUREN ST		82 Street Add		it Address (P.	O. Box Number is Not Accep	nable)		
	LYWOOD FL 33021			83					
1.					·				
ter en				84 City			FL.	85 Zip	Code
<u> </u>	to the provisions of Sections 607.0			ļ	 			abagaing ite	registered
office or re agent. I as	to the provisions of Sections of 7.9 gistered agent, or both, in the Sta in familiar with, and accept the obli	ite of Florida. Such change was igations of, Section 607.0505, I	s authorized Florida Stat	of the corutes.	rporation's bo	pard of directors, I hereby acc	ept the appoir	ntment as re	egistered
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO C	FFICERS AN	D DIRECTO	ORS IN 12
TITLE	PVP	☐ DELETE	1.1 रा	TLE.	Τ"			☐ Change	Addition
NAME	DOYLE, TOMMY		1.2 N	AME					
1	4412 VAN BUREN			TREET ADDRES	:0			,	
STREET ADDRESS	HOLLYWOOD FL 33021			TY-ST-ZIP	٦				
CITY-ST-ZIP	S/T	☐ DELETE	2.1 T		+			Change	Addition
TITLE		المالية المالية	1					_ '	_
NAME	DOYLE, TAMMY		2.2 N						\
STREET ADDRESS	4412 VAN BUREN			2.3 STREET ADDRESS					i
CITY-ST-ZIP	HOLLYWOOD FL 30321			ITY-ST-ZIP			 -	Change	Addition
TITLE		☐ DELETE	3.1 T					Change	
NAME	•		3.2 N						
STREET ADDRESS	Company of the control of the contro	اد چېپولېدد د ده د اد ماه	·3.3 S	TREET ADDRES	نة · S	•			- '+
CITY-ST-ZIP			3.4. 0	ITY-ST-ZIP					
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NAME	•		4.2N	AME					į
STREET ADDRESS	•		4.3 S	TREET ADDRES	is				ĺ
CITY-ST-ZIP			4.4 C	ITY-ST-ZIP					
TITLE		☐ DELETE	5.1 ∏	TLE				☐ Change	☐ Addition
NAME I			5.2 N	AME					
STREET ADDRESS			5.3 \$	TREET ADDRES	iS .]
CITY-ST-ZIP	•		5.4 C	TY-ST-ZIP	ļ				
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NAME			6.2 N	AME					
STREET ADDRESS	-		6.3 S	TREET ADDRES	ss			•	
CITY-ST-ZIP	•		6.4 C	TY-ST-ZIP					
1.011-51-71									

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 empowered 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 on an attachment with an address, with all other like empowered.

SIGNATURE:



FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90117 047 ***150.00