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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1 70024

121

1. Corporation	JESTY, INC.	_/0234		(0)								
Principal Place of Business  3045 FOUNTAINHEAD DR. LARGO FL 34640 US				Mailing Address 3045 FOUNTAINHEAD DR. LARGO FL 33770-4231 US								
			•						<ol> <li>Date Incorporated or Qualified 06/04/1990</li> </ol>		te of Last Re 1/1996	port
2. Principal Place of Business				2a. Mailing Address				4	f. FEI Number			plied For
21 Side Apt # sta				Suite, Apt. #, etc.					59-3014007		\$8.75 A	t Applicable
Suite, Apt #, etc.				27				1	5. Certificate of Status Desired		Fee Re	
City & State				City & State				7	6. Election Campaign Financing		\$5.00	May Be
23				28				Trust Fund Contribution Added to Fees				
7ip	Country		<u> </u>	Zip		Country		1	B. This corporation has liability fo			199.032,
24	1 25 9. Name and Address of Current			29 30 30 September 4 April 20				Florida Statutes Yes No  10. Name and Address of New Registered Agent				
DINK		datoss of ourion	· riogio	orea regulit		81	Name	•	<u> </u>			
PINK, LINDA 3045 FOUNTAINHEAD DRIVE						82	Chart A		(D.O. Day Number in Not Assent	hla\		
SUITE 800							SUBBLAG	JUIESS	(P.O. Box Number is Not Accepta	1016)		
LARGO FL 34640					83							
						84	City			FL	<b>85</b> Zip (	Code
11. Pursuant	to the provisions of	Sections 607.050	2 and 60	7.1508, Florida Statut	es, the	above	e-named c	orporat	tion submits this statement for the s board of directors. I hereby acc		changing it	s registered
agent. La	registered agent, or nnt familiar with and	both, in the State accept the obliga	of Floric	la, Such change was a Section 607.0505, Fi	authorii orida S	tetutes	$\mathcal{O}$	oration's	s board of directors. I hereby acco	epi ine app	ointment as	registered
SIGNATURE	Signature Special printer	d name of registered age	and title	rapplicable (NOT	E: Regisi		on signature re	quired wh	nen reinstating)	DATE	~	<u> </u>
12.		OFFICERS AND	DIREC		1:	3.			ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	PO DATE DODEST I			DELETE	1.1	TITLE					Change	Addition
NAMÉ	PINK, ROBERT					2 NAME	l					
STREET ADDRESS	: 3045 FOUNTAINHEAD DR. LARGO FL						ADDRESS					
CITY - ST - ZIP TITLE	VST						ST-ZIP				Change	Addition
MAME NAME	PINK, LINDA			C. DECENT			2.1 TITLE 2.2 NAME					, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	3045 FOUNTAI	NHEAD DR.					ADDRESS					
CITY - ST - ZIP	LARGO FL					4 CITY-						
THELF	D	<del></del>		DELETE		TITLE					Change	Addition
NAME	PINK, LINDA				3.2	2 NAME						
STREET ADDRESS	3045 FOUNTAI	NHEAD DR.			3.3	3 STREET	ADDRESS					
CHY-ST-ZIP	LARGO FL					4. CITY-:	S1 - ZIP					T A A A Second
TITLE				☐ DELETE		1 TITLE					Change	☐ Addition
NAME						2 NAME						
STREET ALIDRESS							ADDRESS					
CHY-ST ZIP				DELETE		4 CITY-S 1 TITLE	51 - ZIP				Change	Addition
TILLE				DELLIE		2 NAME						
NAME STREET ADORESS							ADDRESS					
CITY-ST-ZIP						4 CITY-S						
TIFLE	<b></b>			☐ DELETE		1 TITLE			, , , , , , , , , , , , , , , , , , ,		Change	Addition
NAME					6:	2 NAME						
STREET ADDRESS					6	3 STREET	r address					
0.3 4 61 7:0						A CITY - 9	GIT. TS					

14. I do 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.

SIGNATURE:

**FILED** 

Apr 28 1997 8:00am

Secretary of State