

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

APPROVED
AND
FILED

10f2

01003229

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

98 JUL 17 PM 4:16

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # **L81854** (6)
 1. Corporation Name **JAD CONTRACTORS INC.**

Principal Place of Business: 2535 MEADOWOOD DR, NEW PORT RICHEY FL 34655
 Mailing Address: 2535 MEADOWOOD DR, NEW PORT RICHEY FL 34655

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24)
 2a. Mailing Address (26-29)
 Suite, Apt. #, etc. (22)
 City & State (23)
 Zip (24) Country (25)
 Suite, Apt. #, etc. (26)
 City & State (27)
 Zip (28) Country (29)

3. Date Incorporated or Qualified: 06/19/1990
 4. FEI Number: 59-3017755 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

9. Name and Address of Current Registered Agent
DAMALOS, ANGELLE D.
2535 MEADOWOOD DR
NEW PORT RICHEY FL 34655

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code **FL**

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	CEO	<input type="checkbox"/> DELETE
NAME	DAMALOS, ANGELLE D.	
STREET ADDRESS	2535 MEADOWOOD DR	
CITY-ST-ZIP	NEW PORT RICHEY FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	600002597986--9
1.4 CITY-ST-ZIP	-07/24/98--01078--016
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	****158.75 ****158.75
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 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: _____

CR2E034 (5/98)

2012

JAD CONTRACTORS, INC.
2535 MEADOWOOD DRIVE
NEW PORT RICHEY, FL 34655
(813)372-1049
FAX: (813)372-0668

July 9, 1998

Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: L81854

To Whom It May Concern:

On April 18, 1998 we filed the 1998 Annual Report for JAD Contractors, Inc and included payment of \$150.00 via Check # 8971. When I did not receive my cancel check by the end of May I contacted your office and was told that things may be backed up and to wait. I called again, the middle of June. I was told the same thing.

I have contacted my bank, daily, and they still do not have record of the check being submitted for payment. Now I receive a second notice. I contacted your office once again and I was told NOT to make this payment again. However, I cannot take the responsibility of being charged late fees for something that was filed 60 days ago.

Therefore, I am enclosing another check for \$158.75. This is for the \$150.00 filing fee and \$8.75 is for the Certification of Status. This way I will know if and when the check was received and I will know that I will not be responsible for any additional fees. At the time you process this check, I am sure you will be able to determine if it is an overpayment or if the original filing was some how misplace in your office or lost in the mail. We live in a very rural area and this would not be the first time our mail has been lost.

I am sure you would agree that I would not intentionally incur a late fee of \$400.00 in my "home state" since I filed on time in every other state we work in.

Thank you for your time and consideration.

Sincerely,



Angelle D. Damalos
CEO

ADD/ddp