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

PROFIT **CORPORATION** ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(7)

PURE HERBS J.B., INC.

**FILED** May 13 1998 8:00am Secretary of State



						_{	API BIBIT BIBYI BI	i i a na in i a da
Principal Place of Business Mailing Address								
% JACQUELINE B. BLOUIN % JACQUELINE B. BLOUIN				l				
1948 ROOSEVELT ST HOLLYWOOD BEACH FL 33020		1948 ROOSEVELT ST HOLLYWOOD BEACH FL 33020				DO NOT WRITE IN THIS SPACE		
HOLLINGO BENOTITE WALLS			. 00020	(JEU		3. Date Incorporated or Qualified		
						04/20/1988		
2. Principal P	face of Business	2a. Mailing Address				4. FEI Number		oplied For
21		26				65-0042957	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Certificate of Status Desired		Additional
22		27				C, Commodic di Giatos Desirot	Fee Re	equired
City & Stat	6	City & State				6. Election Campaign Financing		May Be
23	Country	Zip Country				Trust Fund Contribution		to Fees
Zip	Country	Zip	—	niry		8. This corporation owes or has paid the c		tangible     No
24	9. Name and Address of Current	29] Registered Agent	30	_		Personal Property Tax due June 30.  10. Name and Address of New Registered		
RI	OUIN, JACQUELINE B.			81	Name			
1948 ROOSEVELT ST				ᇳ	A			
	DLLYWOOD BEACH FL 33020		Ì	62	Street Addre	ess (P.O. Box Number is Not Acceptable)		
			83					
						· · · · · · · · · · · · · · · · · · ·	Table 1	
				84	City	FI	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the at	DOVE	-named corpo	oration submits this statement for the purpose	of changing i	ts registered
onice or r	egistered agent, or both, in the State ( im familiar with, and accept the obliga	of Florida, Such change was a tions of, Section 607.0505, Fil	authorizea orida Stat	3 by utes.	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE								
	Signature, typed or printed name of registered agen			i Ager	nt signature required			
12.			13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR Change	
TITLE	BLOUIN, JACQUEUNE B.		1.1 10				- Cuande	Addition
NAME	1948 ROOSEVELT ST		1.2 NA					
STREET ADDRESS	HOLLYWOOD BEACH FL			1.3 STREET ADDRESS 1.4 City-St-Zip				-
CITY-ST-ZIP	TIOCETTICO CONSTITE	DELETE	2.1 TII		- ZIP		Change	Addition
NAME		- vector	2.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			2.40					i
TITLE		DELETE 317					☐ Change	Addition
NAME			3.2 NA	3.2 NAME				ļ
STREET ADDRESS			3.3 STREET ADDRESS		ADDRESS			İ
CITY-ST-ZIP	3.4.		3.4. CI	TY-SI	T-ZIP			
TITLE		DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 ST	REET /	ADDRESS			ľ
CITY-ST-ZIP			4.4 CITY-S		- ZIP			
TITLE		☐ DELETE	5.1 TIT	LE			☐ Change	Addition
NAME			5.2 NA					
STREET ADDRESS					address			
CITY-ST-ZW	· · · · · · · · · · · · · · · · · · ·	T AFIETE	5.4 CIT		-ZIP		T 6:	A 4-107 -
TITLE		☐ DELETE	6.1 TiT				Change	Addition
NAME			6.2 NA	-				
STREET ADDRESS					ADORESS			ľ
CITY-ST-ZIP			64 CII	Y-\$1	-ZIP			

Interest of the composition of the receiver of the receiver of 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.

GNATURE: