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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M81278

(7)

FILED Feb 18 1998 8:00am Secretary of State

JUST N	Management Services, in	IC.									
Principal Place of Business Mailing Address									18 1 (011 61911 6 34		1 B1611 1881
701 ENTERPRISE RD. EAST. #805 701 ENTERPRISE RD. EAST											
SAFETY HARBOR FL 34695 SAFETY HARBOR FL 3469								DO NOT W	RITE IN THIS	CDACE	
						-	3. Date Inc	corporated or Qualit		SI ACE	
							05/13				
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Num			Ar	plied For
21		26					59-1	947439		No	ot Applicable
Suite, Apt.	#, etc.	Sulte, Apt. #, etc.					5. Certifica	te of Status Desire	ı 🗀	\$8.75	
22		27							Fee Re		
City & Stat	e	City & State					Campaign Financia	ng ,	\$5.00		
23 Zip	Country	28	Zip Country					nd Contribution		Added	
24	25 29 30			C. This corporation of the part in bands it you man					angiole No		
9. Name and Address of Current Registered Agent								nd Address of New			
.1118	ST, SUSAN			61	Name						
3074 EAGLES LANDING				82	Street Address (P.O. Box Number is Not Acceptable)						
	EARWATER FL 34621		02 Stieet At			aaiosa	- (r.O. DOX 1	TOTAL STATE OF THE			
				83							
				84	City					85 Zip (Code
									FI	_ ` _ `	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statut	es, the al	oove	named c	corpora	ition submits	this statement for	the purpose i	of changing it	s registered
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flo	orida Stat	utes.		or across	0 000,000,0		ocopi (no up	pontinon as	Tog.otorbu
SIGNATURE]
12.	Signature, typed or printed name of registered agent		13.	Agen	al signature re	equired w	hen reinstating)	NS/CHANGES TO C	DATE DESIGERS AN	D DIRECTOR	S IN 12
TITLE	DP DELETE			1.1 TITLE			ADDITION	O/O/IANGEO TO C	ATTOENS AN	A Change	Addition
NAME	JUST, SUSAN			1.2 NAME					<u>.</u> .		}
STREET ADDRESS	3074 EAGLES LANDING			1.3 STREET ADDRESS			S GW	LF BLVD	• ART .	. 2003	
CITY-ST-ZIP	CLEARWATER FL			1.4 CITY-ST-ZIP			SACW!	ater f	WAID	4 330	167
TITLE	D	DELETE	2.1 TITLE							Change	Addition
NAME	GIBSON, SANDRA 222)		2.2 NA	2.2 NAME			_ ~_				00
STREET ADDRESS	3720 PHILLIPPE DR.		2.3 STREE		address	Юο	ס וף	rron wi	DDS B	swo.	1567
CITY-ST-ZIP	SAFETY HARBOR FL			ITY-SI	T-ZIP	4791		mpeop.	FURI	DU 24	<u>⊗></u>
TITLE			3.1 70		J			ι		∐ Change	L.J Addition
NAME			3.2 NA								
STREET ADDRESS					ADDRESS						İ
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NAME OVEREZ ADDOCES			4.2 N		LOCOTOC						1
STREET ADDRESS					ADDRESS						
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NAME			5.2 NA		(
STREET ADDRESS					ADDRESS						1
CITY-ST-ZIP			5.4 CI		1						
TITLE		☐ DELETE	6.1 TIT							Change	Addition
NAME			6.2 NA	ME							
STREET ADDRESS			6.3 ST	AEET A	address						ĺ
			_								

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:

813-726-4000