NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPÀRTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000002751

1. Corporation Name

PEANUT BUTTER + JESUS, INC.

Principal Place of Business 5722 SOUTH FLAMINGO ROAD 80X 150 FORT LAUDERDALE FL 33330

2. Principal Place of Business

Mailing Address

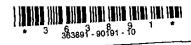
2a. Mailing Address

5722 SOUTH FLAMINGO ROAD

FORT LAUDERDALE FL 33330

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90023 031 ****70.00





3. Date Incorporated or Qualifed 05/14/1008

| 21 | | 26 | | | | | (W) 17/ 18/ | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------|---------------|-------------------------------------------------------|----------------------|----------------------------------------------|------------------------------------------|---------------|------------------|-------------|
| Suite, Apt. | # etc. | | Apt. #, etc. | | | | 4. FEI Number | | · · | App | lied For |
| _ ~ . | te Box Number 150 | 77 T | plute A | DOK NUM | wbe | 250 س | | | | Not | Applicable |
| City & Stat | 10 0 - /- | | & State | | | | 5. Certificate of | Statue Decired | | \$8.75 A | |
| 23 | - | 28 | | | | | 5. Certificate of | Sælus Desired | | Fee Rec | uired |
| Zip | Country | Zip | | Col | untry | | 6. Election Car | npaign Financing | | \$5.00 N | day Be |
| 24 | 25 | 29 | | 30 | | | Trust Fund | Contribution | <u>ب</u> | Added to | Fees |
| 271 | 9. Name and Address of Current I | | Agent | | Τ | | 10. Name and | Address of New f | legistered / | Agent | |
| | | | | | 81 | Name | | | | | |
| A 400 A 60 A 640 B | | | | | (D.O. D. N. Sharin McAnagarinia) | | | | | | |
| MIMS, KATHI | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| 5722 SOUTH FLAMINGO ROAD | | | | | 83 | | | | | | |
| FORT LAUDERDALE FL 33330 | | | | | | | *** | | · | | |
| | | | | | 84 | City | | | EI | 85 Zip C | ode |
| | | | | | لــــــــــــــــــــــــــــــــــــــ | | | | The number of | abanalan ita t | registered |
| 11. Pursuant | to the provisions of Sections 617.0502 | ind 617.15 | 08, Florida St | atules, the a | d hu | -named como | oration submits this in's board of direct | statement for the ors. I hereby acces | t the appoin | ntment as reg | istered |
| οπισειοτι agent. I a | to the provisions of Sections 617.0502 (registered agent, or both, in the State of the familiar with, and accept the obligation | ns of, Secti | on 617.0503. | Florida Sta | tutes. | · | | | • • • | - | |
| SIGNATURE | | | | | | | | | | . — | |
| SIGNATURE | Signature, typed or printed home of registered agent a | nd title if applic | stale. (A | | d Agen | l signature required | t when reinstating) | 01.4.4.a.i.a.i.a. | CATE | O DIDECTOR | 20 IN 12 |
| 12. | OFFICERS AND | DIRECTO | | 13. | | | ADDITIONS/ | CHANGES TO OF | FILERS AN | | Addition |
| TITLE | PD | | ☐ DELETE | 1,17 | ME | | | | , | Change | C) Accident |
| NAME | MIMS, KATHI | | | 1.2 N | AME | | | | | • | |
| STREET ADDRESS | 5722 SOUTH FLAMINGO ROAD | | | 1.3 \$ | TREET | ADDRESS | | | | | , |
| CITY-ST-ZIP | FORT LAUDERDALE FL 33330 | | | 1,40 | TY-51 | r-zap | | | | | |
| TITLE | ST D | | ☐ DELETE | 2,1 7 | TILE | | | | | ☐ Change | Addition |
| NAME | MIMS, STEPHEN HURD | | | 221 | AME | 1 | | | | | |
| | | | | | | ADDRESS | | | | • | |
| STREET ADDRESS | | | | | | | | • | | - | |
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| STREET ADDRESS | <u> </u> | | | 3.3 9 | TREET | ADDRESS | | | • | | |
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| NAME | 1 | | | 4,21 | WWE | ì | | | • | | • |
| STREET ADDRESS | | | | 4.3 \$ | TREET | ADDRESS | | | | | |
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| STREET ADDRESS | | | | 540 | HTY-S | r-zie | | | | • | |
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| STREET ADDRESS | | | | | | - 1 | ~ . | •• | • | | |
| CITY-ST-ZIP | | | | | TY-S | | | Electric Control | I further con | tifu that the In | formation |
| 14. I hereby | certify that the information supplied with | this filing d | oes not qualif | y for the exi | empti | on stated in S | ection 119.07(3)(i) | , riorida Statutes. | i ununer cei | ary mar me in | nousman |

4. 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 imbormation 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 617. 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

LEIGHTUBE REVENUENCE

President

2/0/9 8

800-514-4286