## 2004 FOR PROFIT CORPORATION

## **ANNUAL REPORT DOCUMENT # P00000042702** 1. Entity Name JBTT HOLDINGS, INC. Principal Place of Business Mailing Address 449 SILVER DEW STREET 3074 W LAKE MARY BLVD #136

LAKE MARY, FL 32746

**FILED** Apr 29, 2004 8:00 am Secretary of State

04-29-2004 90241 037 \*\*\*150.00

94072164

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## DO NOT WRITE IN THIS SPACE

LAKE MARY, FL 32746

Applied For 4. FEI Number 59-3640127 Not Applicable 

5. Certificate of Status Desired

04272004

\$8.75 Additional Fee Required

CR2E034 (10/03)

6. Name and Address of Current Registered Agent LOE, BRIAN R. 3074 W LAKE MARY BLVD #136

No Chg-P

LAKE MAF	RY, FL 32746	•		in.	THIS S	PACE	
8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its reg	pistered office or	egistered agent, or b	oth, in the State o	f Florida. I am fan	niliar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title it	applicable. / (NOTE: Re	gistered Agent signatur	a required when reinstating)	· · · · ·	DATE	<del>,                  </del>
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Trust Fund Contribu		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECT	TORS -	Committee of the second		Linear the second of the control of	NEWS CONTROL	restation and
TITLE NAME . STREET ADDRESS CITY-ST, ZIP	D MILES, JAMES C 449 SILVER DEW ST LAKE MARY, FL 32746						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILES, BETTY J 449 ILVER DEW ST LAKE MARY, FL 32746						
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	age of page of page of page of			DO	NOT	WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS	SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N. (2)						
TITLE			300		OF CALL PLAN		WITH THE PARTY OF STREET

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP - -

BETTY J. MILES

4/27/04

407-322-4931