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 # P93 0000 10176 (4)

P.J.Y. CORPORATION

FILED Apr 07 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					
852 CARSWell Ave 852 CARSWell A			1) AVe		
13.11. HILL EL	71117 1	HOLLY HIEL, FI 34117		DO NOT WRITE IN THIS SPACE	
Holly HILL, FI	<i>Dorr</i> •	tolly into	, , , , ,	3. Date Incorporated or Qualified	
				02/03/1993 4. FE Number	
2. Principal Place of Business	2a. Mailing Add	ress		4. FFI Numbel	Applied For
21	26			59-3168087	Not Applicable
Suite, Apt. #, etc.	Suite, Apt 4	Ψ, etc		5. Certificate of Status Desired	\$8.75 Additional
22	27			3. Ce lineate di Status Bestred	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Country	7ip	Counti	'y	8. This corporation owes or has paid the	
24 25	[29]	30	.	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
9. Name and Address	of Current Registered Agent	8	Name	10. Hame and Address of New Hegistere	a Agent
YATES, PAT 852 CARSWell HOLLY H.CL, F		ľ	T T T T T T T T T T T T T T T T T T T		
BED CAPSILLE !!	AVe	8:	Street Addre	ess (P.O. Box Number is Not Acceptable)	
30 012000	51 72117	8:			
HOLLY MILL, P	1 20.00	0,	1		
,		8	1 City	F	85 Zip Code
	207 (140 - 1007 1500 Fl	iva Otat tan Iba abar			
office or registered agent, or both, in	rthe State of Flonda. Such cha	nge was authorized t	by the corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the a	opointment as registered
agent. I am familiar with and accept	the obligations of, Section 607	7.Õ505, Florida Statute	es.		
SIGNATURE			gent agnature require	g when senistating) DAIE	
	egistens agen, and ble dispossable CERS AND DIRECTORS	13.	girsi sigrature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIBLCTORS IN 12
		DECETE 1 1 TOTAL		7.0017.07.07.07.07.07.07.07.07.07.07.07.07.07	☐ Change ☐ Add-tion
NAME STORES AND SES AN	4/	12 NAME			-
STREET ADDRESS 852 CARS	WALLAVE	l.	T ADDRESS		
CITY-SI-ZIP HOLLY HILL	LF132111	140114			
THE ST	L, F132117 10hN SW211AVE	DELETE 2.1 THLE			☐ Change ☐ Addition
NAME YATES J	OhN	2.2 NAME			
STREET ADDRESS 852 CAR	suell Ave	23 SIN	T ADDRESS		
CITY-ST-ZIP HOLLY H	IL, FI 32117	2 4 CITY			
IDLE		DELETE 31 HILLE			☐ Change ☐ Addition
NAME		3.2 NAME			
STREET ADDRESS			1 AUUR: SS		
CITY - SI - ZiP		3.4. CITY	ST-7IP		
TITLE		DELETE 4.1 TITLE			☐ Change ☐ Addil-on
NAME		4-2 NAM	·		
STREET ADDRESS		4.3 STREE	T AUDRESS		
CITY - ST - ZIII		4.4.00 Y	\$T - 7 P		
TITLE]	DELETE 517HLE			☐ Change ☐ Add-tion
NAME		5.2 NAME			75 I
STREET ADDRESS		5.3 STREE	1 ADDRESS		~
City - St - 7 ₀ P		5.4.0(1)	\$1 - 7 [1		411
THLE	(OELCIE 6 1 THLE		300002482	— Eli@bage □ Alletion
NAME		6.2 NAME		300002482 -04/08/9801014-	-011
STREET ADDRESS		63 S1RE	1 ADDRESS	***150.00	
CITY-ST-ZIP		6.4 CHY-	\$1-71	To the second Holland	

14. I hereby certify that the information supplied with his filing does not qualify for the exemption stated in Section 119.07(3)(r), Florida Statutes. I further certify that the information indicated on this armus' report or suppliemental armusal report is true and accurate and that my signature shall have the same legal effect as if made under onth, that I am an officer or director of the corporation or the receiver or hostele 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.

4-1-98 904-255-8663