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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS P93000012027 (7) DOCUMENT # J.J.F. ENTERPRISES, INC.

FILED Apr 15 1998 8:00am



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Principal Place of Business Mailing Address					- 1				
1255 SW THELMA STREET 1255 SW THELMA STREET PALM CITY FL 34990 PALM CITY FL 34990									
US US		PALM CITY FL 34990 US			DO NOT WRITE IN THIS SPACE				
1					-	3. Date Incorporated or Qualified	. IIV ITIIO OF	AUE	
						02/09/1993			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			pplied For
21		26				65-0390465 Not Applicabl			
Suite, Apt. #, etc.		Suite, Apt #, etc.				5. Certificate of Status Desired			Additional
22		27			5. Certificate of Status Desired	<u> </u>	Fee R	lequired	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be	
		28				Trust Fund Contribution		~	to Fees
24	├──		Count	b. This corporation owes of has paid the current year intangible					
241	25 9. Name and Address of Curren	29 Registered Agent	30			Personal Property Tax due June 10. Name and Address of New Re		_	No
FLEMING, JOHN					Θ	10. Name and Address of New Ne	Bisteled W	Jent	
1255 SW THELMA STREET			8						
		82 Street Addre			s (P.O. Box Number is Not Acceptate	ole)			
PALM CITY FL 34990			8	1					
			ļ.,.					·	
			8	City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	arid 607.1508, Florida Statute	s, the abo	/e-name	ed corpora	tion submits this statement for the p	ourpose of c	hanging i	1s registered
office or ri	to the provisions of Sections 607.0502 egistered agent, or both, in the Slate m familiar with, and accept the obliga	of Florida. Such change was a tions of, Section 607.0505, Flor	uthorized b rida Statuti	y the co is.	orporation'	's board of directors. I hereby acce	ot the appoi	ntment as	registered
SIGNATURE	, ,								
	Signature, typed or printed name of registered ager			innt signatu	ure required w	rhen reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE		-	
TITLE	FLEMING, NANCY	☐ DELETE	1.1 TITLE		1		L.	_ Change	Addition
NAME Street address	1255 SW THELMA STREET		1.2 NAME						Í
	PALM CITY FL			T ADDRESS	·				
CITY-ST-ZIP TITLE	P	DELETE	1.4 CITY - 2.1 TITLE	SI-ZIP	_		Г	Change	Addition
NAME	FLEMING, JOHN	E Better	2.2 NAME					T curatile	Audition
STREET ADDRESS	1255 SW THELMA STREET		f	T ADDRESS	,]				Ì
CITY-ST-ZIP	PALM CITY FL		2.4 CITY		' [
TITLE		DELETE	3.1 TITLE	01-E#				Change	Addition
NAME			3 2 NAME				_		
STREET ADDRESS			3.3 STAEE	T ADDRESS	;				
CITY-ST-ZIP			3.4. CITY	3.4. CITY - ST - ZIP					,
TITLE		☐ DELETE	4.1 TITLE				L	Change	Addition
NAME			4, 2 NAME						
STREET ADDRESS			4.3 STREE	T ADDRESS					}
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	1				
TITLE		☐ DELET e	5.1 TITLE		1			Change	☐ Addition
NAME OTOTET ADDRESS			5.2 NAME						
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-	ST-ZIP				1 05-	1.000
		☐ D€LETE	6.1 TITLE				L	Change	☐ Addition
NAME CODECT ADDRESS			6.2 NAME	DDFF05	1				
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP			6.4 CITY - 3	T-ZIP	<u> </u>				

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 chapter, or on an attachment with an address.