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 #

P93000020389 (1)

J.B. KRESH, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address	Mailing Address			I INDICATE THE STATE OF THE STATE CONTRACTOR OF THE STATE			
3249 COCC	PLUM CIRCLE	3249 COCOPLUM CIF	3249 COCOPLUM CIRCLE						
COCONUT CREEK FL 33063			COCONUT CREEK FL 33063			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			1
						03/18/1993			
	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		A	pplied For
21		26				65-0394890			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	·			5. Certificate of Status Desired			Additional equired
22 City & State		City & State	City & State			5 Stanting Companies Figure			
23		 	28			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Country			8. This corporation owes or has pai			
24	25	29	30			Personal Property Tax due June			No
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
l k	(resh, barbara g		ĮB.	1 Na	ame				
3249 COCOPLUM CIR				2 St	treet Addre	dress (P.O. Box Number is Not Acceptable)			
(COCONUT CREEK FL 33063			_		<u> </u>			
			8	3					
			84	4 Ci	ity		FL	85 Zip	Code
dd Durayaat	to the provining of Spetiage 607 (0602 and 607 1609 Florida Stat	utor the above	10. 20	mod corpo	ration submits this statement for the p		changing i	te registered
office or	registered agent, or both, in the St	ate of Florida. Such chan ge wa :	s authorized t	by the	e corporatio	on's board of directors. I hereby accep	t the appo	ointment as	registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules.									
SIGNATURE	Signature, typed or printed name of registered	agont and lifte if applicable (N)	OTE Registered A	gent s/g	onature required	d when reinstating	DATE		
12.		AND DIRECTORS	13.	<u> </u>	<u> </u>	ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 TITLE					Change	Addition
NAME	KRESH, BARBARA G		1.2 NAME						
STREET ADDRESS	3249 COCOPLUM CIR		1.3 STREE	et addf	RESS				
CITY-ST-ZIP	COCONUT CREEK FL 33		1.4 CITY-	ST - ZIP	Р				
TITLE		☐ DELE te	2.1 TITLE					Change	☐ Addition
NAME			2.2 NAME	-					
STREET ADDRESS			2.3 STREE	ET ADDA	RESS				
CITY-ST-ZIP		Delete.	2. 4 CITY		IP			Change	T tablian
TITLE		DELETE	3.1 TITLE				·	Change	☐ Addition
NAME			3.2 NAME		0000		•		}
STREET ADDRESS			3.3 STREE						j
CITY-ST-ZIP		DELETE	3.4. CITY 4.1 TITLE		IF			Change	☐ Addition
NAME		occiti	4.1 IFILE				ļ	U.iungo	
STREET ADDRESS			4.3 STREE		BESS				
CITY-ST-ZIP			4.4 CITY-						
TITLE		DELETE	5.1 TITLE		·			Спапде	Addition
NAME			5.2 NAME					-	
STREET ADDRESS			5.3 STREE		RESS				ļ
CITY-ST-ZIP			5.4 CITY-						
TITLE		☐ DELET E	6.1 TITLE					Change	☐ Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	ET ADDR	RESS				
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	P				
	certify that the information supplier	d with this filma does not qualify				ection 119.07(3)(i), Florida Statutes. I	lurther cer	lify that the	information

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 information indicated on this annual report or suppliemental 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.

COLLEGE BOLLE

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13/98 974-96

CRZE