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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mrd You

DOCUMENT # P93000020872

JERSEY SHORE SUBS, INC.

Mailing Address

FILED Feb 03, 1999 8:00am **Secretary of State**

02-03-1999 90025 041 ***150.00



| Principal Place | e of Business | Mailing Address | | | | | • |
|--|--|--|-------------------------|---|---|---|----------------------------|
| 470 HILLSBORO BLVD. | | 470 HILLSBORO BLVD. | | | (왕) (*) · | | |
| DEERFIELD BEACH FL 33441 DEERFIELD BEACH F | | | 441 | | DO NOT WRITE | IN THIS SPACE | |
| | | | | | | IN THIS STACE | |
| | • | | | | 3. Date Incorporated or Qualifed | | I |
| 4 | | | | | 03/15/1993 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | plied:For. |
| 21 | | 26 | | | 65-039582 0 | | t Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certifcate of Status Desired | \$8.75 <i>A</i> | |
| 22 | | 27 | | | 5. Certificate of Clarida Books | Fee Re | quired |
| City & State | | City & State | | | 6. Election Campaign Financing | _ \$5.00 | May Be |
| 23 | | 28 | | | Trust Fund Contribution Added to Fees | | |
| Zip Country | | Zip Country | | | 8. This corporation owes the current year Intangible | | |
| 24 | 25 | 29 | _ | | Personal Property Tax. ☐ Yes ☐ No | | |
| | 9. Name and Address of Curren | | 1241 | , | 10. Name and Address of New Re | gistered Agent | |
| | · Y REPORT | A STATE OF STATE | | 81 Name | | | |
| TRA | VO, JACQUELINE | | | | | | |
| 6773 CALLE DEL PAZ NORTH | | | | 82 Street Ad | dress (P.O. Box Number is Not Acceptable | e) ; . | |
| | CA RATON FL 33433 | | | 83 | 13.45 F. D. D. W. S. S. S. S. | 1811 1818 1811 1818 1811 | 156 12 113 123 |
| 500 | A INTON 1 E GO 100 | | | | 「日本教育」をはいる。 1代を持ち、主婦・より、哲士を経 | 登出版版版版 | |
| | | | | 84 City | 2 | 85 Zip (| Code |
| Service of the Control of the Contro | A COLOR | and the second of the | | | | FL | |
| 11. Pürsuant | to the provisions of Sections 607.050 | 2 and 607.1508, Florida Statu | ites, the a | bove-named co | rporation submits this statement for the pution's board of directors. I hereby accept | irpose or changing its the appointment as re | registered |
| office or i | registered agent, or both, in the State am familiar with, and accept the obliga | of Florida, Such change was itions of, Section 607,0505, Fl | orida Stat | u by the corpora tutes. | alion's board of directors. Thereby assort | по арропилот — | 5 |
| | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered age | nt and title if applicable. (NOT | E: Registere | d Agent signature requ | iired when reinstating) | DATE | |
| 12. | | ID DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFI | | |
| TITLE | PDT | ☐ DELETE | 1.1 T | ITLE | £1.69 (4.55) | Change | ☐ Addition |
| NAME | TRAVO, JACQUELINE | | 1.2 N | AME | * * * * * * * * * * * * * * * * * * * | | |
| | ATTO CALLE DEL DAT M | | 13.5 | TREET ADDRESS | | | |
| STREET ADDRESS | BOCA RATON FL 33433 | | | ITY-ST-ZIP | | | |
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14. 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 changed, or on an attachment with an address, with all other like empowered.