## 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 #

P93000048736 (1)

J/B HANEY, INC.

**FILED** May 08 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								
	AND AVENUE	1201 NORWOOD AVE						
CLEARWATER FL 04816		CLEARWATER FL 94816			DO NOT WRITE IN THIS SPACE			
US 33157		00 25	US 33156		3. Date Incorporated or Qualified			
					07/12/1993			
2. Principal Pl	ace of Business	2a, Mailing Address			4, FEI Number	T 14	pplied For	
21		26			59-3193058		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				···	Additional	
22		27			5. Certificate of Status Desired		equired	
City & State		City & State			Election Campaign Financing	\$5.00	May Be	
23		28	28					
Zip	Country			,	8. This corporation owes or has paid the curr			
24	25	29	30			- ' -	□ No	
	g. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered A	gent		
HAI	NEY, JAMES E		81	Name				
	1 NORWOOD AVENUE		82 Street Ado		Address (P.O. Box Number is Not Acceptable)			
	ARWATER FL <del>04010</del>		62 Stiest Add		address (r.o. pox rumber is not Acceptable)			
-	33156		83					
	23134					TT -		
			84	City	FL	<b>85</b> Zip	Code	
11. Pursuant t	o the provisions of Sections 607.0	502 and 607.1508, Florida Statut	les, the abov	e-named o	corporation submits this statement for the purpose of	changing i	its registered	
office or re	egistered agent, or both, in the Sta	ite of Florida, Such change was a	authorized by	y the corp	oration's board of directors. I hereby accept the appo	ointment as	registered	
	Trialina Titi, and accept the cen	ignical of about 1 557,0005, 17	onda bialato	J.				
SIGNATURE	Signature, hyped or printed name of registered in	geot and title if applicable (NOT	E Registered Age	ent signature f	required when reinstating) DATE			
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	DP	☐ DELETE	11 TITLE			Change	☐ Addition	
NAME	HANEY, JAMES E		12 NAME	i				
STREET ADDRESS	1201 NORWOOD AVE		1.3 STREET	ADDRESS				
CITY-ST-ZIP	CLEARWATER FL		1.4 CiTY- S	iT-ZIP				
TITLE	DST	DELETE	2.1 TITLE			Change	Addition	
NAME	HANEY, REBECCA		2.2 NAME	]			-	
STREET ADDRESS	1201 NORWOOD AVE.			ADDRESS				
CITY-ST-ZIP	CLEARWATER FL		2 4 CITY-	ST-ZIP				
TITLE			3.1 TITLE			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY -	ST-ZIP				
TITLE		☐ DELETE	4.1 FITLE			Change	☐ Addition	
NAME			4. 2 NAME				ļ	
STREET ADDRESS			4.3 STREET	ADDRESS			į	
CITY-ST-ZIP			4.4 CITY - S	1 - ZIP				
TITLE		DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
City-St-ZIP			5.4 CITY-S	T-ZIP				
TITLE		DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME	İ				
STREET ADDRESS			63 STREET	ADDRESS			j	
CITY-ST-ZIP			6.4 CITY-S				l	
	ertify that the information supplied	with this filing does not qualify for			d in Section 119.07(3)(i), Florida Statutes. I further cer	tify that the	information	

indicated on this annual report or supplicrimital arrival 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