

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Motham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000065190 (9)

1. Corporation Name

J.C. WEST OR FL V. INC.

Principal Place of Business

**STATE ROAD 60 COLONIAL DRIVE
SUN PLAZA
WEST ORLANDO FL 4
US**

Mailing Address

**417 CROSSWAYS PARK DRIVE
WOODBURY NY 11797
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/14/1993

3a. Date of Last Report

07/19/1994

2. Principal Place of Business

21

2a. Mailing Address

25

Jennifer Conventures

4. FEI Number

59-3230828

Applied For

Not Applicable

22. Suite, Apt. #, etc.

22

26. Suite, Apt. #, etc.

27

419 Crossways Park Dr.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

23. City & State

23

28. City & State

28

Woodbury, NY

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24. Zip

24

25. Zip

25

29. Zip

29

11797

30. Country

30

USA

8. This corporation has liability for intangible taxes in the State of Florida
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SNEIDER, BARBARA H
7079 WOODBRIDGE COURT
BOCA RATON FL 33434**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office, a registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if different from Officer or Director)

Signature of Registered Agent (if different from Officer or Director)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	D GREENFIELD, HARLEY
2. STREET ADDRESS	1725 YORK AVENUE
3. CITY & STATE	NEW YORK NY 10028
4. NAME	
5. STREET ADDRESS	
6. CITY & STATE	
7. NAME	
8. STREET ADDRESS	
9. CITY & STATE	
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	
13. NAME	
14. STREET ADDRESS	
15. CITY & STATE	

1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	
3. CITY & STATE	☐ Change ☐ Addition
4. NAME	
5. STREET ADDRESS	
6. CITY & STATE	☐ Change ☐ Addition
7. NAME	
8. STREET ADDRESS	
9. CITY & STATE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY & STATE	☐ Change ☐ Addition
13. NAME	
14. STREET ADDRESS	
15. CITY & STATE	☐ Change ☐ Addition

14. I, the undersigned, certify that the information reported on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.0502, Florida Statutes. I further certify that the information is true and correct and that my signature shall have the same legal effect as if I had personally signed the information. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes, and I am familiar with and accept the obligations of Section 607.0506, Florida Statutes.

SIGNATURE: **X**

SIGNATURE AND TYPE IN PRINTED NAME OF BOTHING OFFICER OR DIRECTOR

HARLEY GREENFIELD 4/18/95 516-416-1982