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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 05 1998 8:00am

Secretary of State

Change

Change

__ Addition

☐ Addition

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

Principal Place of Business

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

P93000070809 (7)

Mailing Address

WESTERN ACCESSORIES BY JEANIE & J.R., INC.

681 E. SEMINOLA BLVD. 681 E. SEMINOLA BLVD. CASSELBERRY FL 32707 CASSELBERRY FL 32707 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 10/01/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-3205690 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional N 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible 24 25 30 Yes **⋉** No 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEIGHTY, EMMA J 661 E. SEMINOLA BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) CASSELBERRY FL 32707 83 84 City 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 or 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, typed or printed name of registered agent and trie if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PST __ DELETE TITLE 1.1 TITLE Change Addition LEIGHTY, EMMA J NAME 1.2 NAME CR2E034 661 E. SEMINOLA BLVD. STREET ADDRESS 1.3 STREET ADDRESS Casselberry fl CITY-ST-ZIP 1.4 CITY-ST-7IP TITLE DELETE 2.1 TITLE Change ☐ Addition NAME LEIGHTY, JOHN R 2.2 NAME 661 E. SEMINOLA BLVD. STREET ADDRESS 2.3 STREET ADDRESS CASSELBERRY FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME

6.4 CfTY-ST-ZIP 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 City-St-7IP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE