## **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 #
1. Corporation Name P9400005534 (0)

JCD MANAGEMENT, INC.

**FILED** 

Apr 29 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address 11401 N. LAKE BLVD 19557 LYONS RD. PALM BEACH GARDENS FL 33418 **BOCA RATON FL 33434** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/20/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Commers 1300 26 65-0464597 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired **タ**フュ 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Bearl Delran 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 3445 24 X No 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WENZEL, KENNETH A 980 N. FEDERAL HWY. **B2** Street Address (P.O. Box Number is Not Acceptable) **STE 440** 83 **BOCA RATON FL 33432** 84 Zip Code 85 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 title if applicable (NOTF: Registered Agent signature required when rainstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE PDS 1.1 TITLE Change Addition NAME DUBIN, BRAHM 1.2 NAME STREET ADDRESS 19557 LYONS BLVD 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE **VPTD** DELETE Change 2.1 TITLE Addition NAME **DUBIN, JEANNE** 2.2 NAME 19557 LYONS RD STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON 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 Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-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.