

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Sep 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000028955 (0)**

1. Corporation Name

JUST GOOD BUSINESS, INC.



Principal Place of Business

Mailing Address

**5222 RUSSELL ST. #23
TAMPA FL 33611**

**5222 RUSSELL ST. #23
TAMPA FL 33611**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/12/1994

4. FEI Number

59-3306592

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 **5002 S. MacDill Ave**

26 **5002 S MacDill Ave**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 **TAMPA, FL**

27 City & State

28 **TAMPA FL**

Zip

Country

24 **33611**

25 **U.S.A.**

Zip

Country

29 **33611**

30 **USA**

9. Name and Address of Current Registered Agent

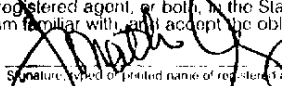
10. Name and Address of New Registered Agent

**CASS, NANCY J
112 S MAGNOLIA AVE
STE 378
TAMPA FL 33606**

81 Name
Jonathan S Agri
82 Street Address (P.O. Box Number is Not Acceptable)
5002 S MacDill
83
84 City **TAMPA** FL 85 Zip Code **33611**

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 of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

8/5/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P**
STREET ADDRESS **AGRI, JONATHAN**
CITY-ST-ZIP **5222 RUSSELL ST. #23
TAMPA FL 33611**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
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.

SIGNATURE



2/6/98

CR2E034 (10/97)