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FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P.94000039731 (2)
1. Corp. Name

TESSE JAY INC.

Principal Place of Business

3011 YAMATO ROAD
BOCA RATON, FL 33434

Mailing Address

3011 YAMATO ROAD
BOCA RATON, FL 33434

2. Principal Place of Business

21 6877 SW 18TH STREET
Suite, Apt. #, etc.

22

City & State

23 BOCA RATON, FL

24 33433

Country

25 US

2a. Mailing Address

26 6877 SW 18TH STREET
Suite, Apt. #, etc.

27

City & State

28 BOCA RATON, FL

29 33433

Country

30 US

9. Name and Address of Current Registered Agent

BARBARA WEILL
6155 NW 76TH MANOR
PARKLAND, FL 33067

3. Date Incorporated or Qualified

5-26-94

4. FEI Number

65-0494192

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

10. Name and Address of New Registered Agent

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 607.04(2) and 607.14(8), 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 607.05(5), Florida Statutes.

SIGNATURE

Signature, typed or printed name, Title, and Address of Officer, Director, or Agent

(NOTE: Registered Agent signature required when agent resigns)

DATE

12. OFFICERS AND DIRECTORS

11 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
11 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
11 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
11 TITLE
NAME
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CITY-ST-ZIP
11 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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☐ DELETE

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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

Barbara Weill

Barbara Weill 4/24/98