

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

9 MAY -1 AM 8:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000039896 (3)

1. Corporation Name

JAASS CONCIERGE, INC.

Principal Place of Business

**125 CRAWFORD BLVD.
BOCA RATON FL 33432**

Mailing Address

**125 CRAWFORD BLVD.
BOCA RATON FL 33432**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/26/1994

3a. Date of Last Report

2. Principal Place of Business

21

Street Apt. # etc.

2b. Mailing Address

26

State Apt. # etc.

22 City & State

27

City & State

23

28

24 Zip 25 Country

29

30

4. FID Number

65-0504259

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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81

Name **Stephen P Guleff**

82

Street Address (P.O. Box Number is Not Acceptable) **405 CANAL PT. N. #104**

83

84

City **DELRAY BEACH**

FL

85 Zip Code **33444**

11. Pursuant to the provisions of Sections 607.062 and 607.1608, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office as required by law, as both in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with and accept the responsibility for the change as required by Section 607.062, Florida Statutes.

SIGNATURE

[Signature]

4-25-95

12. OFFICERS AND DIRECTORS

NAME
STREET ADDRESS
CITY, STATE, ZIP

**DPS
GULEFF, STEPHEN P
125 CRAWFORD BLVD.
BOCA RATON FL 33432**

NAME
STREET ADDRESS
CITY, STATE, ZIP

**DVT
CHANSER, ANDREW M
125 CRAWFORD BLVD.
BOCA RATON FL 33432**

NAME
STREET ADDRESS
CITY, STATE, ZIP

**D
NEUSTAEDTER, JEFFREY
125 CRAWFORD BLVD.
BOCA RATON FL 33432**

NAME
STREET ADDRESS
CITY, STATE, ZIP

NAME
STREET ADDRESS
CITY, STATE, ZIP

NAME
STREET ADDRESS
CITY, STATE, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

1. NAME
2. STREET ADDRESS
3. CITY, STATE, ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or have been appointed to serve on the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 of this filing. I am not a registered agent or an address.

SIGNATURE:

[Signature]
STEPHEN P. GULEFF

4-25-95

407-368-8424