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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000051899**1. Corporation Name

JB3 ENTERPRISES, INC.

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7800 BELFORT	PARKWAY	7800 BELFORT PARKWAY	Y							
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JACKSONVILLE	FL 32256	JACKSONVILLE FL 32256	5				NOT WRITE I	V THIS SPAC	·E	
us		US				3. Date Incorporated of	or Qualifed			
		•				07/14/1994			 _	
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		-		olied For
21		26				59-3290709				Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	–			5. Certifcate of Status	Desired			dditional
22		27				J. Co		´ F	ee Red	quired
City & State		City & State	City & State			6. Election Campaign	Financing _			May Be
23		28				Trust Fund Contrib	ution	ΑΑ	dded to	Fees
Zip	Country	Zip	Соц	untry		8. This corporation ov	ves the current y	ear Intangible		
24	25	29	30			Personal Property		□ Ye		□No
	9. Name and Address of Curren	nt Registered Agent		L.,_		10. Name and Addres	s of New Regi	stered Agent		
				81	Name					
OWEN, GEORGE E JR.			92 Ct A		Ct Addres	(D.O. Pay Number in I	Vist Assentable)			
888 1	EXECUTIVE CENTER DR W		82 Stre		Street Addres	ss (P.O. Box Number is I	NOT Acceptable)			
I	E 202								: 33,	- 53/
	PETERSBURG FL 33702			83		<u> </u>		. 137	· . • . •	
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44 8	to the provinces of Continue 607 050	2 and 607 1509 Florida Stat	utes the a	ahove	named cornor	ration submits this staten	ent for the pur	ose of chang	ina its r	registered
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State	of Florida. Such change was	authorize	d by th	ne corporation	n's board of directors. I he	ereby accept the	appointment	as reg	jistered
agent. I ar	m familiar with, and accept the obliga	itions of, Section 607.0505, F	lorida Stat	itutes.		•				
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: I						uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
		· · · · · · · · · · · · · · · · · ·			signature required v				FCTO	PS IN 12
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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, with all other like empowered.

6.4 CITY-ST-ZIP

EQUIRED YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Feb 15, 1999 8:00am

Secretary of State

02-15-1999 90025 048 ***150.00

(904) 281-0080