

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 16 AM 10:43

DOCUMENT # P94000058516 (3)

1. Corporation Name:

JTB GROUP, INC.

Principal Place of Business

1400 NORTHWEST 9 AVENUE
UNIT 10
BOCA RATON FL 33486

Mailing Address

1400 NORTHWEST 9 AVENUE
UNIT 10
BOCA RATON FL 33486

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/09/1994

3a. Date of Last Report

1st REPORT

4. FEI Number

65-051 0039

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

2. Principal Place of Business

21 1400 S.E. 17th Terrace

Suite, Apt. #, etc.

22

City & State

23 Deerfield Beach FL

Zip

24 33441

Country

25 USA

2a. Mailing Address

26 1400 S.E. 17th Terrace

Suite, Apt. #, etc.

27

City & State

28 Deerfield Beach FL

Zip

29 33441

Country

30 USA

9. Name and Address of Current Registered Agent

LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

JILL T. BALSAM

82 Street Address (P.O. Box Number is Not Acceptable)

1400 S.E. 17th Terrace

83

City

Deerfield Beach

FL

85 Zip Code

33441

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

Jill T. Balsam

JUNE 14/95

(Signature) (Typed or Printed Name of Registered Agent and Mailing Address)

(Signature) (Typed or Printed Name of Registered Agent and Mailing Address)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

1400 NORTHWEST 9 AVENUE, UNIT 10
BOCA RATON FL 33486

2. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

3. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

4. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

5. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

6. TITLE

NAME

STREET ADDRESS

CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

JILL T. BALSAM
1400 S.E. 17th Terrace
DEERFIELD BEACH, FL 33441

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY ST ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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:

Jill T. Balsam

JILL T. BALSAM, President

JUNE 12/95

305 421 4771

(Signature) (Typed or Printed Name of Signing Officer or Director)

(Date)

(Telephone Number)