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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000069028 (6)

JAR OF MARCO, INC.

FILED Apr 13 1998 8:00am Secretary of State



Principal Place of Business Mailing			ing Address				a Madicade ela latti alaki aderi abeli abeli aderi abeli aderi abeli aderi abeli abeli abeli abeli abeli abeli			
1001 NORTH	BARFIELD DR		1001 NORTH BARFIELD DR							
MARCO ISLAN	ID FL 33937	MARCO ISI	LAND FL 33937				DO NOT WRITE IN THIS	SPACE		
							3. Date Incorporated or Qualified			
							09/19/1994			
2. Principal Pl	ace of Business	2a. Mailing	Address				4. FEI Number	TA	pplied For	
21		26					65-0530795		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					¢o 75 addition			
22		27					5. Certificate of Status Desired	Fee P	tequired	
City & State)	City & S	tate				6. Election Campaign Financing	\$5.00	May Be	
23		28					Trust Fund Contribution		to Fees	
Zip	Country	Ζιρ		Country	У		8. This corporation owes or has paid the cur			
24	25	29	30	<u> </u>					No No	
	g, Name and Address of Curre	nt Registered Ag	ent		Τ.		10. Name and Address of New Registered	Agent		
TUC	CKER, GLENN E			81	1	Name				
204 SUN BANK CENTER				82	82 Street Address (P.O. Box Number is Not Acceptable)					
950	NORTH COLLIER BLVD.				┖					
MAI	RCO ISLAND FL 33937			83	1					
				84	1	City		85 Zip	Code	
					1	J.,	FL	, " "		
11. Pursuant t	to the provisions of Sections 607.05	02 and 607 1508,	Florida Statutes,	the abov	Θ-Π	amed corpo	pration submits this statement for the purpose o	changing	its registered	
office or re	egistered agent, or boin, in the Stat m familiar with, and accept the oblic	e of Florida, Such dations of, Section	607.0505, Florid	la Statute:	yt⊓ S.	ie corporatio	on's board of directors. I hereby accept the app	ORIGINALI 4:	s registered	
SIGNATURE	,	•								
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable	(NOTE R	egistered Age	ent s	signature required	d when reinstating) DATE			
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	Р	Į	DELETE	1.1 TITLE				Change	Addition	
NAME	saitta, juliana			1.2 NAME						
STREET ADDRESS	500 € JOY CIRCLE			1.3 STREET	T AD	ORESS				
CITY-ST-ZIP	MARCO ISLAND FL 33937			1.4 CITY - 5	ST-Z	ZIP				
TITLE	VP	{	DEFELE	2.1 TITLE				☐ Change	Addition	
NAME	Saitta, Richard			2.2 NAME		:				
STREET ADDRESS	500 E JOY CIRCLE			2.3 STREET	T AD	DRESS				
CITY-ST-ZIP	MARCO ISLAND FL 33937			2. 4 CITY-	ST-	ZIP				
TITLE			DELETE	3.1 TITLE				☐ Change	Addition	
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREET	T AD	IDRESS				
CITY-ST-ZIP				3.4. CITY-	ST-	ZIP				
TITLE			DELETE	4.1 TITLE				Change	Addition	
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET	T AD	IDRESS				
CITY-ST-ZIP				4.4 CITY - 5	S1 - Z	ZIP				
TITLE			DELETE	5.1 TITLE				Change	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	T AD	DRESS				
CITY-ST-ZIP				5.4 CITY - 8						
TITLE			DELETE	6.1 TITLE	<u> </u>			Change	Additio	
NAME		•		6.2 NAME				_ •		
STREET ADDRESS				6.3 STREET		IDRESS				
CITY-ST-ZIP				6.4 CITY - S						
OITT-31-ZIP	antiful that the information running			0.4 (/117-3	31-2	zir	Continu 110 07/2)/i) Florido Statutos I further o	artifu that th	o information	

Indicated on this annual report or supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio 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 opposite attachment with an address.

SIGNATURE: