PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90023 035 ***150.00

DOCUMENT # P9400070109

1. Corporation Name

JIM-MAR	CORPORATION			e space par till chill didle parts abits date date date	: 10611 86151 (161	4414 (81) (44)
		CXNT	HiA H. Rugi	ers III		
Principal Place	e of Business	Mailing Address 7801	CRIWN PT-1	200 there	. 18611 46161 11611	
Principal Place of Business Mailing Address ZSU CRUWN PT.RD. #1113 10500-26-8AN JOSE BLVD. JACKSONWILLE FL 32237 DO NOT WRITE IN THIS SPACE						
1171	TOM HILL SR. BU	504 00	LINKIN AD	DO NOT WRITE IN THIS	S SPACE	
717	1016 1112 310,00	, J 12 60 ,		3. Date Incorporated or Qualifed		
MAG	CON, GA. 50 31210	> GROVETOW	N1617-30813	09/21/1994		}
2. Principal Pl	lace of Business	2a. Mailing Address	•	4. FEI Number	<u> </u>	pplied For
21		26		59-3267586		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	•	Additional equired
22				a Floring Commiss Financing		May Be
	e	28		6. Election Campaign Financing Trust Fund Contribution		to Fees
Zip	Country	Zip	Country	This corporation owes the current year Ir		
24	25	29 30		Personal Property Tax.	[☑ Yes	□No
	9. Name and Address of Current			10. Name and Address of New Registered	Agent	
81 Name (" 14 HT) LIA M ROCERS						
	ERS, JIMMY C		82 Street Add	ress (P.O. Box Number is Not Acceptable)		
		COLYMBIA RD.	380	1 CRUWN POINT RD.		
JAG	KSONVILLE FL 32259 GANGE	TOWN, GA. 3081	2 83	CONDO # 11/3		ļ
	CICUDE	, 1000,007,000	84 City		85 Zip	Code
				ACRSOUVI/Je, FI	322	-57
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 corporations board of directors. I hereby accept the appointment as registered						
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505/Floridal Statutes.						
SIGNATURE	JIMMY C RUGE	RE PRES. L	1/a	zu 2/	¥ /99	′
SIGNATURE	Signature typed of printed name of registered agent	and title applicable. (NOTA: Rec	istered Agent signature require	ed when reiny ating) DAYE		
12.	C Y/V / KOTFRERS/AND	DIRECTORSEND, YIJ P	13 Cyn Min	A A DONGLEMONIANGES TO OFFICERS A	ND DIRECTO	ORS IN 12 Addition
TITLE	PSTD /	U NEWE 15	1.1 TITLE /	•	□ Change	
NAME	ROGERS, JIMMY C	46 BGLUMBIN KD.	1.2 NAME			Į
STREET ADDRESS	1707 HAWKUBESI UB		1.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE PL-32259 0 X	TO DELETE	1.2CITY-ST-ZIP		☐ Change	Addition
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NAME			2.2 NAME			}
STREET ADDRESS			2.3 STREET ADDRESS			}
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NAME			3.2 NAME			
STREET ADDRESS		1	3.3 STREET ADDRESS			
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NAME	-		5.3 STREET ADDRESS			.]
STREET ADDRESS			5.4 City-ST-ZiP		•	Ì
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		Change	Addition
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NAME			6.3 STREET ADDRESS			1
STREET ADDRESS			6.4 CITY-ST-ZIP			
CITY-ST-ZIP			9.7 0111-01-21			

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.

SIGNATURE:

MONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR