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

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000086678 (7)

JNR PROPERTIES, INC.

Principal Place of Business	

Mailing Address

## **FILED** Sep 09 1998 8:00am Secretary of State



Traicipai i ido	C OI Duamosa	widining /	TOUTOBB				
P O BOX 254 CLERMONT F		P O BO CLERMO	X 254 ONT FL 34712				
						DO NOT WRITE IN THIS S	PACE
						3. Date Incorporated or Qualified	
						11/28/1994	
2. Principal P	lace of Business	2a. Mailir	ng Address			4. FEI Number	Applied For
21		26				59-3296819	Not Applicat
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 Additional
22		27				<b>5.</b> Certificate of Status Desired	Fee Required
City & State	0	City 8	3 State			Election Campaign Financing	\$5.00 May Be
23		28				Trust Fund Contribution	Added to Fees
<b>Z</b> ip	Country	<b>Z</b> ip		Country	,	8. This corporation owes or has paid the curr	ent vear Intangible
24	25	29		30			Yes No
	9. Name and Address of Currer		Agent	12-1		10. Name and Address of New Registered A	gent
RA	MNARAIN, SUABI			81	Name		
	46 N CHERRY LAKE GROVES R	n					
	ERMONT FL 34711	,		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
CL	EMMONI FL 34711			83	···		
				84	City		85 Zip Code
					l	FL FL	<u> </u>
. 11. Pursuant t office or r	to <b>the</b> provisions of Sections 607,050 ag <b>iste</b> red agent, or both, in the State	i2 and 607,150 of Florida. Suc	08, Florida Statut chichango was	tes, the abov authorized bi	e-named c 7 the coroo	orporation submits this statement for the purpose of oration's board of directors. I hereby accept the appe	changing its registere introent as registered
agent. I a	m familiar with, and accept the oblig	ations of, Secti	ion 607.0505, FI	orida Statute	S.	, , , , , , , , , , , , , , , , , , , ,	
SIGNATURE							
	Signature typied or printed hadie of registered agr				ent signature re	equired when reinstating) DATE	
12.	OFFICERS AN	D DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	VP		DELETE	1.1 1111.6		i	Change Additi
NAME	TUSSING, RICK			1.2 NAME		,	
STREET ADDRESS	10332 CLEAR LAKE DR			1.3 STREET	ADDRESS	.//^	
CITY-ST-ZIP	CLERMONT FL			1.4 CITY - S	IT-ZIP	N/H·	
TITLE	P		☐ DELETÉ	2.1 TITLE		N/A ·	Change Additi
NAME	ANTONY, JOHN	- 4	A 19/21/	2.2 NAME		.1'	
STREET ADDRESS	ANTONY, JOHN 11130 CRESCENT BAY BLVD	OR T.	0 121311	2.3 STREET	ADDRESS	11/1/s	
CITY-ST-ZIP	CLERMONT FL 34	7/2.		2. 4 CITY- 3	ST - 71P	vojp.	
TITLE	8		DELETE	3.1 TITLE			Change Additi
NAME	RAMNARAIN, SUABI			3.2 NAME	1		-
STREET ADDRESS	7746 N CHERRY LAKE GROV	ÆS RD		3.3 STREET	ADDRESS	.11.	
ı	CLERMONT FL					NIA	
CITY-S1-ZIP TITLE	T		DELETE	3 4. CiTY-1	21.11		Change Additi
NAME	D'OLIVERIA, JOSEPH					1	
ľ	4788 GLENALBYN DR. 21	042 FIL	LUEROA SI	4. 2 NAME	ADDDESS	n/ D	
STREET ADDRESS	LOS ANGELES CA CAR	SON CA	90745-196	4.3 STREET		rin	
CITY-ST-ZIP	LOO NIGILLEO ON LINE	301-) -"	DELETE		I - ZIP		Change Additi
TITLE			T INTER	5.1 TITLE		'	T ∧uguðe Ti vogun
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET			
CITY-ST-ZIP			05,555	5.4 CITY - S	T - 21P		<b></b>
TITLE			☐ DELFTE	6.1 TATLE		l	Change Additi
NAME				6.2 NAME	- 1		
STREET ADDRESS				6 3 STREET	ADDRESS		
CITY-ST-ZIP				6.4 CITY - S	1-2IP		

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.