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 # 1. Corporation Name JASEC, INC. P94000090532 (0)

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 72 \$ DIXIE HWY 72 \$ DIXIE HWY ST AUGUSTINE FL 32095 ST AUGUSTINE FL 32095			DO NOT WRITE IN THIS SPACE		
				 Date Incorporated or Qualified 12/13/1994 	
	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		59-3284365	Not Applicable
Suite Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & Stat	to	City & State			Fee Required
23	ie .	28		6, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Register	ed Agent
	ANT, CHRISTINE T		81 Name		
	S DIXIE HWY		82 Street Add	dress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·
ST AUGUSTINE FL 32095					
			83		
			84 City		85 Zip Code
				rporation submits this statement for the purpose	
office of r agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the oblig. Signature, types or printed name of registered age	ations of, Section 607.0505, Flo	uthorized by the corpora rida Statutes. Registered Agent signature regi	ation's board of directors. I hereby accept the a	
12.		O DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PSID	☐ DELETE	1.1 TITLE		Change Addition
NAME	PLANT, CHRISTINE T		1.2 NAME		
STREET ADDRESS	72 S DIXIE HWY		1.3 STREET ADDRESS		
CITY - ST - ZIP	ST AUGUSTINE FL 32095		1 4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME	يناقف ا	
STREET ADDRESS			2.3 STREET ADDRESS	j	
CITY-ST-ZIP		DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE		ריז סנונונ	3.1 TITLE		C Change C Addition
NAME STREET ADDRESS			3.2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. City-St-Zip		:
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	•		5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		6.4 CITY-ST-ZIP		
14, I hereby of indicated	certify that the information supplied won this annual report or supplementa	ith this filing does not qualify fo al armual report is true and accu	r the exemption stated in urate and that my signati	n Section 119.07(3)(i), Florida Statutes. I further ure shall have the same legal effect as if made	certify that the information under oath; that I am an

- (Christine V. Plant)