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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000002047 (5)

J & M CONSULTANTS, INC.

## **FILED** Jan 21 1997 8:00am Secretary of State



Principal Pl	lace of Business	Mailing Address				f nedriger ing Holor entri Activ gelik belik belik belik belih belih belih deri Misik redi (Cer				
4555 SE MANATEE TERRACE STUART FL 34997 US		4555 SE MANATEE TERRACE STUART FL 34997-6923 US								
		••				3. Date Incorporated or Qualif 01/06/1995	ied		te of Last F 4/1996	Report
2. Principa 21	l Place of Business	28. Mailing Address 26				4. FEI Number 59-3294005			——————————————————————————————————————	pplied For lot Applicabl
Suite, Ap 22	pt.#, etc.	Suite. Apt. #, etc.				5. Certificate of Status Desired	d			Additional Required
City & Si	itate	City & State				6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe				
Ζip	Country	Zip	Coi	intry		8. This corporation has liability				s. 199.032,
4	25	29	30			Florida Statutes		Yes [		
	9. Name and Address of Curre	ent Hegistered Agent		81	Name ,	10. Name and Address of Ne			.gent	
	URVITZ, JEFFERY C.			"	Name ]	HURWITZ, JEFFREY	L	•		
	555 SE MANATEE TERRACE TUART FL 34997			82	Street Addr	ress (P.O. Box Number is Not Acce	eptable	e)		
O.	IONII I L 04001			83				<u></u>		<u> </u>
				84	City				<b>85</b> Zip	Code
	ant to the provisions of Sections 607.05				,			FL		
office o agent SIGNATUR	or registered agent or both, in the Stat 1 am fam liar with, and accept the obtoned 8E	gations of, Section 607.0505,	Florida Sta	tutes		red when roinstating)	ccept	The appoint	ointment as	s registerea
12.		ND DIRECTORS	13.	o Ago	in a griatore regar	ADDITIONS/CHANGES TO C	OFFICE		DIRECTO	RS IN 12
TITLE	DP	DELETE	1,1 7	TLE					☐ Change	Additio
NAME	HURWITZ, JEFFREY L	_	1,2 N	AME						
STREET ADDRES	4555 SE MANATEE TERRACE		1.38	TREET	ADDRESS					
CITY - S7 - 7IP	STUART FL			TY-5	T-ZIP				TT 7	
TITLE	S T HURWITZ, MINDY JOY	DELETE	2.1 7						Change	L. Additio
NAME	ASSE OF MANATES TERRACE	<del>-</del>		IAME	ADDRESS					
STREET ADDRES	STUART FL	-		ornee i CITY - S	i					
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NAME		<del></del>		(AME						
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NAME	•		4.2	NAME	İ					
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NAME SAME ASSESSED				IAME TOTET	1DDDECC					
STREET ADDRES	88				ADDRESS					
CiTY-SI+7₽	i		6.40	S-YTIC	1-ZIP					

14. I do 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 in disable on this arresist 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 18 changed, or on an attachment with an address.

SIGNATURE:

Jeffry L. HUNNITZ