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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIF

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000002225 (7)

PHYLLIS D. JACOBS, INC.

Principal Place of Business	Mailing Address	Mailing Address			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		*****	,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*** **** **** *		
17900 HAYNIE LANE	17900 HAYNIE LANE										
JUPITER FL 33478					DO NOT WRITE IN THIS SPACE						
1	••			3	. Date In	corporated or	Qualified				\neg
_					01/06	3/1995					
2. Principal Place of Business	2a. Mailing Address			4	. FEI Nur				F	Applied For	\Box
21	26				65-)548224			١	Not Applicable	Ð
Sufte, Apt. #, etc.	Suite, Apt #, etc.	Suite, Apt #, etc.			. Certifica	ate of Status D	esired			Additional	-1
22	27					· -			Fee F	Required	↲
City & State	City & State			6.		n Campaign Fi	•			May Be	
Zip Country	28	Country	,			und Contributio				to Fees	4
24 25	29 30	Juditu	У			rporation owes al Property Tax				ntangible No	
	Z9 S0 of Current Registered Agent					and Address					\dashv
JACOBS, PHYLLIS D		81	Name	Dust	1130						┪
17900 HAYNIE LANE		82	Ctroot A	PHY	CU3	Number is Not			rville		4
JUPITER FL 33478		62		900 (HAY		me	pie)			
		83									٦
		84	City 🗝.	(0		****			85 Zip	Code	┥
			1 20	uphtu				FL	_ 3	3 <i>3 478</i>	
11. Pursuant to be provisions of Sections office or replaced agent, or both, in	607.0502 and 607.1508, Florida Statutes, the State of Florida, Such change was author	e abov ized bi	e-named c v the corpo	orporation's	on submit board of	is this statemei directors. I her	nt for the preby acce	purpose on the ap	of changing pointment a	its registered s registered	1
agent. I am (millar with, and accept	the State of Florida. Such change was author the obligations of, Section 607,0506. Florida	Statute	S.				, acce	p. 0.0 0p.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	s rogioloida	
SIGNATURE Son Live, typed in printed name of re	the Marie		ant signature re								
		13.	unt signature ne			NS/CHANGES	TO OFFIC	DATE CERS AN	ID DIBECTO	PS IN 12	-1
TITLE PVST		.1 TILLE			15/1				Change		\dashv
NAME ACONS, PHYLLIS D	1 1	2 NAME		ΡΉΥĹ	115	Dougl	95 M	OTTE	`م/1i		
STREET ADDRESS 17900 HAYNIE LANE		.3 STREET	ADDRESS		0,244 s	INTE LA	NE		••1	•	
CITY-ST-ZIP JUPITER FL		.4 CITY - S	1-ZIP	Just	1270	PL 3	3478				
TITLE 3		.1 TITLE	'	.	· · · · · ·				Change	Addition	٦ï
NAME 1	¹	2 NAME									
STREET ADDRESS	· . <u>I</u> 2	3 STREET	ADDRESS								
CITY-ST-ZIP	2	. 4 CITY-:	ST-ZIP			3					
TITLE / #	☐ DELETE 3	.1 TITLE				· v.			☐ Change	Addition	٦
NAME	3	3.2 NAME									ı
STREET ADDRESS	3	3.3 STREET ADDRESS									
DOGGE		4. CITY-1	ST - ZIP								╛
	☐ DELETE 4	.1 TITLE	ļ						Change	Addition	1
	4	. 2 NAME									
ETTER ADDRESS	4	.3 STREET	ADDRESS								1
VITY COLOR		4 CITY - S	T - ZIP								
	L DELETE 5	.1 TITLE							☐ Change	Addition	1
NAMESE" -	. 5	2 NAME									1

14. Thereby 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 33 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

5.4 CITY - ST- ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

Change

Addition

FILED

May 04 1998 8:00am

Secretary of State