03-11-1999 90184 021 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500003670

1. Corporation Name DU-J'S, INC.

		_	
Principal	Place	of	Business

20 43RD AVE.

VERO BEACH FL 32968

Mailing Address

1225 45TH CT SW



20 43RD AVE. VERO BEACH FL 32968 VERO BEACH FL 32968 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 01/12/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0588795 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 6. Election Campaign Financing City & State City & State \$5:00-May-Bo= Added to Fees Trust Fund Contribution 23 28 Country Zip Zip Country 8. This corporation owes the current year Intangible ⊠No Personal Property Tax. 30 24 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent JACKSON, JOHN A Street Address (P.O. Box Number is Not Acceptable)

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 corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

83

84 City

SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE ☐ Change ☐ Addition 1.1 TITLE TITLE DURRELL, DAVID B 1.2 NAME NAME 1146 MIRACLE MILE 1.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 2.1 TITLE TITLE JACKSON, JOHN A JR. 22 NAME NAME 20 43RD AVE./PO BOX 7132 VERO BCH FL.32960 2.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE_ TITI E 3.1 TITLE JENKINS, BRIAN K 3.2 NAME NAME 7150 20TH ST., SUITE B 3.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 32966 CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ Addition □ DELETE Change 4.1 TITLE TM F 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

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.

02109/99 (561) 564-0590

CR2E034 (11/98

Zip Code

85