

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000009061 (9)

1. Corporation Name

J & S UNLIMITED, INC.



Principal Place of Business

P.O. BOX 3319
SARASOTA FL 34230

Mailing Address

P.O. BOX 3319
SARASOTA FL 34230

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

02/02/1995

3a. Date of Last Report

4. FEI Number

05-0555947

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

I will be my
own registered
Agent!

81 Name Salvatore A. Falco
82 Street Address (P.O. Box Number is Not Acceptable)
6983 Superior Street Circle
83
84 City Sarasota
85 Zip Code FL 34243

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.

SIGNATURE

Salvatore A. Falco

5/9/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President ☐ DELETE

NAME FALCO, JEANINE L.
STREET ADDRESS 4093 HEARTHSTONE DRIVE
CITY - ST - ZIP SARASOTA FL 34238

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME FALCO, JEANINE L.
1.3 STREET ADDRESS 6983 Superior St. Circle
1.4 CITY - ST - ZIP SARASOTA FL 34243

TITLE Vice President ☐ DELETE

NAME FALCO, SALVATORE A.
STREET ADDRESS 4093 HEARTHSTONE DRIVE
CITY - ST - ZIP SARASOTA FL 34238

2.1 TITLE President (Vice) ☒ Change ☐ Addition

2.2 NAME FALCO, SALVATORE A.
2.3 STREET ADDRESS 6983 Superior St. Circle
2.4 CITY - ST - ZIP SARASOTA FL 34243

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Jeanine L. Falco

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96 (941) 351-1053

Date

Daytime Phone #

CR2E034 (12/95)