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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham - v

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P95000025824 (0)

J.Y. SERVICES, INC.

FILED Mar 24 1998 8:00am Secretary of State



Principal Plac	pe of Business	Mailing Address			EBY BUILD HAVE HAVE HAVE HAVE
i i		-			
941 NORTH ORLANDO AVENUE P O BOX 608361 WINTER PARK FL 32769 ORLANDO FL 32860					
US US				DO NOT WRITE IN THIS SPACE	
1				3. Date Incorporated or Qualified	
				03/29/1995	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 199		26	, <u>.</u> .	34-1722348	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22					Fee Required
23 De Winter Park 28				B. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country		Added to Fees
24 32	789 25 US		90	This corporation owes or has paid the cu Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curren			10. Name and Address of New Registered	
N	MAEV THOMAS E		81 Name	NAMEY TI	-
	HIN ORLANDO AVE - 418	MAME! I homes t			
on official and of				ddress (P.O. Box Number is Not Acceptable)	
- T	MICH LYMINITE OF !	ando +4 328	SO 8 83	19au per m. Sair	!I
			84 City	Belowder Winter Park FL	85 Zip Code 32789
11. Pursuant to the provisions of Sections 607.0502 and 607.508, 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 obligators of Section 607.0505, Florida Statutes.					
agent. I a	im familiar with, and account the obliga	ations of, Section 607.0505, Flori	da Statutes.	poration's board or directors. I hereby accept the app	oointment as registered
SIGNATURE SIZINGS ENGINELY					
	Signature typied or motion name of registered age		Registered Agent signature		
12. TITLE	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	
	•	₩ Dereit	1.1 TITLE	2	Addition Addition
NAME	YUZWA, JOAN M		1.2 NAME	YUZWA, Joan M	
STREET ADDRESS	7133 SNOW LANE, #E CHARLOTTE NC 28227		1.3 STREET ADDRESS	1033201d Camber Rd. Charlette NC 28107	
CITY-ST-ZIP TITLE	CHARLOTTE NC 28221	DELETE	1.4 CITY - ST - ZIP	Charlotte NC 28197	To Assess
		DCCE1E	2.1 TITLE		Change Addition
NAME			2.2 NAME	,	
STREET ADDRESS			2.3 STREET ADDRESS	*** **********************************	
CITY-S1-ZIP TITLE		DELETE	2. 4 CITY-ST-ZIP		Change
NAME		□ btttlt	3.1 TITLE		Change Addition
			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
NAME		☐ VELETE	4.1 TITLE		☐ Clightige ☐ Auxilition
			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	-	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		peccie			- Onlarige La radination
STREET ADDRESS			5.2 NAME		
			5.3 STREET ADDRESS .		Ì
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP		Change Addition
			6.1 TITLE		CT CLISHINGS ETT MODITION
NAME STORET ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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 supplementation 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 on 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.