

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

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90091 020 ***150.00

DOCUMENT # P95000032407

1. Corporation Name

J.M. ENTERPRISE MANAGEMENT RECRUITMENT SPECIALIS
TS, INC.

Principal Place of Business

11640 MINNEOLA DR
SUITE 200
NEW PORT RICHEY FL 34654
US

Mailing Address

11640 MINNEOLA DR
STE 200
NEW PORT RICHEY FL 34654
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/25/1995

4. FEI Number

59-3162515

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 11640 Minneola Dr.

Suite, Apt. #, etc.

22 Suite 200

City & State

23 New Port Richey, FL.

Zip

24 34654

Country

25 US

2a. Mailing Address

26 11640 Minneola Dr.

Suite, Apt. #, etc.

27 Suite 200

City & State

28 New Port Richey, FL.

Zip

29 34654

Country

30 US

9. Name and Address of Current Registered Agent

MOREHEAD, JENNIFER
11640 MINNEOLA DR, STE 200
NEW PORT RICHEY FL 34654

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 JENNIFER B. MOREHEAD

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

(NOTE: Registered Agent signature required when reinstating)

March 30, 1999

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

P

NAME

MOREHEAD, JENNIFER

STREET ADDRESS

11640 MINNEOLA DR, STE 200

CITY-ST-ZIP

NEW PORT RICHEY FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

SIGNATURE:

JENNIFER B. MOREHEAD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

March 30, 1999

Daytime Phone #

(727) 869-8264

CR2E034 (1/1/98)

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