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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90001 003 ***150.00

DOCUMENT # P95000032655 1. Corporation Name

J & S DEVELOPMENT GROUP, INC.

Principal Place	e of Business	Mailing Address			_				
3200 HENDERSON BLVD. 3200 HENDERSON BLVD. #200						·			
#200 #200 Tampa Fl 33609 Tampa Fl 33609						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 04/26/1995			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	App	lied For	
21		26				59-3355296	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		<u></u>		5. Certifcate of Status Desired	8.75 A		
City & State	City & State City & State					6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	- 1	
Zip	Country	Zip	Count			This corporation owes the current year Intang Personal Property Tax.		□No	
24	9. Name and Address of Currer		30			10. Name and Address of New Registered Age	ent		
	T. Harry and Addition of Odital	B A A A	$\neg \uparrow$	81	Name				
MADHU, JAY 3200 HENDERSON BLVD. #200				82	Street Addres	Address (P.O. Box Number is Not Acceptable)			
TAMPA FL 33615			}	83					
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				84	City	FL	35 Zip C		
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was at	uthorized	bv 1	the corporation	ration submits this statement for the purpose of cha o's board of directors. I hereby accept the appointm	anging its r ent as reg	egistered istered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE:	Registered /	Agent	t signature required v				
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND I			
TITLE	PS	☐ DELETE	1.1 TIT	Œ		L] Change	☐ Addition	
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CITY-ST-ZIP	TAMPA FL		1.4 CIT		-ZIP		Change	Addition	
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NAME	MADHU, GANAPA		2.2 NAME		I		1 Outsings		
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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 suppliemental 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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS