Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90214 017 \*\*\*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 # P95000040913

1. Corporation Name

	JING CO, INC.									
Principal Place of	Business	Mailing Address								
4 NORTH FEDERAL HIGHWAY DANIA FL 33004 4 NORTH FEDERAL HIGHWAY DANIA FL 33004					•					
		•				L	DO NOT WRI	E IN THIS	SPACE	
	•						Date Incorporated or Qualifed 05/22/1995			
2. Principal Place	of Business	2a. Mailing Address				4.	FEI Number		Ap	plied For
21		26				-	65-0595957		No	t Applicable
Suite, Apt. #, et	ic.	Suite, Apt. #, etc.	-				Continue of Chattan Doniand		\$8.75	Additional
22		27				5.	Certifcate of Status Desired	_ _	Fee Re	equired
City & State		City & State				6.	Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution		Added t	to Fees
Zip	Country	Zip	Cou	intry	<del>,</del>	8.	This corporation owes the curre	ent year Inta	ngjble	
24	25	29	30			1	Personal Property Tax.		Yes	□No
9.			10.	Name and Address of New R	egistered A	gent				
				81	Name		·			
MAGGI, JOSEPH LEWIS					Street Addre	(D	O. Day Number is Net Assert	blo)		
4 NORTH FEDERAL HIGHWAY					Street Addre	ess (P.	O. Box Number is Not Accepta	DIO)		
DANIA FL 33004							<del></del>			
							<u> </u>	_		
l				84	City			FL	85 Zip (	Code
office or regist agent. I am fa SIGNATURE	e provisions of Sections 607.05t tered agent, or both, in the State miliar with, and accept the obliga ature, typed or printed name of registered age	of Florida. Such change was a tions of, Section 607.0505, Flor	utnorized rida Stati	i by utes	e-named corporation the corporation the corporation the corporation the corporation is a corporation to the corporation the co	on's Doa	ard of directors. I hereby accep	purpose of 0 t the appoin	thanging its	registered gistered
12.		ND DIRECTORS	13.				DDITIONS/CHANGES TO OF	ICERS AN	DIRECTO	RS IN 12
	SD ·	☐ DELETE	1.1 TF	TLE					☐ Change	☐ Addition
1	SEPH LEWIS MAGGI	•	12 N	AME						
Į.	N FEDERAL HWY		1351	TREE	T ADDRESS					
100	NIA FL				ST-ZIP					
CITY-ST-ZIP UF	NION I E		2.1 TI		71*ZIF				☐ Change	Addition
NAME	•	<b>—</b>	2.2 NA		- 1				-	
	••				T ADDRESS					
STREET ADDRESS										
CITY-ST-ZIP		☐ DELETE	3.1 Tr		ST-ZIP			<u> </u>	Change	Addition
TITLE		□ preceit								
NAME			3.2 N/							
STREET ADDRESS					TADDRESS					
CITY-ST-ZIP			_		ST-ZIP				☐ Change	☐ Addition
TITLE		☐ DELETE	4.1 TI						☐ Change	Audulion
NAME			4. 2 N	AME				-		
STREET ADDRESS			4.3 ST	TREE	TADDRESS					

6.4 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.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ DELETE

DELETE

☐ Change

☐ Change

☐ Addition

Addition