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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000042353 (9)

JANET GLOVER & ASSOCIATES, INC.

| Principal Plac | e of Business | Mailing Address | | | | | | |
|--|-------------------------------------|---------------------------------|-----------------------------|---|---|--------------|-----------------------|---------------|
| 9141 S.W. 23RD ST. 9141 S.W. 23RD ST. SUITE B SUITE B FT. LAUDERDALE FL 33324 FT. LAUDERDALE FL 33 | | | 3324 | | DO NOT WRIT | E IN THIS SF | 'ACE | |
| | | | | | 3. Date Incorporated or Qualified 05/31/1995 | | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number | | At | pplied For |
| 21 | | 26 | | | 65-0588689 | | | ot Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | | Additional equired | |
| City & State | | City & State | | Election Campaign Financing Trust Fund Contribution | | | May Be to Fees | |
| Zip 24 | | | Country 30 | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No | | | |
| | 9. Name and Address of Curr | rent Registered Agent | | | 10. Name and Address of New R | egistered Aç | jent | |
| | OVER, JANET | | 81 | Name | | | | |
| 1 | I1 S.W. 23RD ST. ITE B | | 82 Street Addres | | dress (P.O. Box Number is Not Accepta | ble) | | |
| FT. | LAUDERDALE FL 33324 | | 83 | | | | | |
| | | | 84 | City | | FL | 85 Zip (| Code |
| SIGNATURE | im familiar with, and accept the ob | agent and tale if applicable {N | OTE: Registered Agr | | uired when reinstating) | DATE | | 20 11. 10 |
| 12. | D OFFICERS A | FFICERS AND DIRECTORS 13 | | Т | ADDITIONS/CHANGES TO OFFI | | Change | Addition |
| NAME | GLOVER, JANET | | 1.1 TITLE 1.2 NAME | | | _ | ☐ Criange | ☐ Mudition |
| STREET ADDRESS 9141 S.W. 23RD ST. SUITE | | В | 1.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP FT. LAUDERDALE FL 33324 | | | 1.4 CITY - ST - ZIP | | | | | |
| TITLE | | DELETE | 2.1 TITLE | | | | Change | Addition |
| NAME | | | 2.2 NAME | | | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | | | | ı |
| City-St-Zip | | DELETE | 2 4 City-St-ZiP 31 Title | | | | Change | Addition |
| NAME | | | 3.2 NAME | | | ١., | , Unange | La Addition |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | 3.4. CITY- S | | | | | ĺ |
| TITLE | DELETE | | 4.1 TITLE | | | Γ | Change | Addition |
| NAME | | | 4.2 NAME | ì | | | | |
| STREET ADORESS | ET ADORESS | | 4.3 STREE1 | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY - S | T-ZIP | | | 7.05 | 1.00% |
| TITLE | ···· | | 5.1 TITLE | | | L. | _ Change | Addition |
| NAME DEDECT ADDRESS | | | 5.2 NAME | 1000000 | | | | |
| STREET ADDRESS | | 5.3 STREET | | | | | | |
| | | | 5.4 CITY - S 6.1 TITLE | I - ZW | | ——— | Change | Addition |
| NAME | | L., SEELE | 6.2 NAME | | | | | |

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 is frue 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 emowered 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 or an attachment with an extress.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

11.4/98 987-346-1

FILED

Jan 27 1998 8:00am

Secretary of State

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