Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90062 034 ***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 # P95000062366

1. Corporation Name

ray blu	JSH & ASSOCIATES, INC.						
Principal Place	of Business	Mailing Ad	ddress				T 1980(1884 119 (Britt Britt Bill) ablit anis anisa arisa arisa arisa aris sant
7949-THIRD AVENUE SOUTH 7949-THIRD AVENUE SOUTH ST. PETERSBURG FL 33707 ST. PETERSBURG FL 33707							
		,					DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed 08/11/1995
2. Principal Pl	ace of Business	2a. Mailing	Address				4. FEI Number Applied For
21							59-3331866 Not Applicable
Suite, Apt.	ite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired \$8.75 Additional Fea Required
	City & State City & State						6. Election Campaign Financing 55.00 May Be
23	28					= -	Trust Fund Contribution Added to Fees
Zip	Country	Zip		Cour	ntry		This corporation owes the current year Intangible
24	25	29	30				Personal Property Tax. ☐ Yes ☑ No
	9. Name and Address of Current	Registered A	\gent				10. Name and Address of New Registered Agent
BROIDA & MCKINNEY, P.A.				81	Name Street An	Idress (P.O. Box Number is Not Acceptable)	
605 - 75TH AVENUE						• • • • • • • • • • • • • • • • • • • •	
ST. PETE BEACH FL 33706				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							uired when reinstating) DATE
	Signature, typed or printed name of registered agent				Agent	t signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PDTS OFFICERS AND	DIRECTORS	DELETE	13. 1.1 TIT	1 F	—-т	Change Addition
NAME				1.2 NAME			. –
STREET ADDRESS	DECOTI, TO THIO TO T				ADDRESS		
1	OT DETEROPLING EL			1.4 CITY-ST-ZIP			1 3
CITY-ST-ZIP	OT. TETERODOMOTE		DELETE			-	☐ Change ☐ Addition
NAME				2.2 NAME		1	·
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CITY-ST-ZIP	i l		2.4 CI	2. 4 CITY-ST-ZIP			
TITLE			3.1 TIT	3.1 TITLE		Change Addition	
NAME	32		3.2 NA	ME			
STREET ADDRESS				3.3 STREET ADDRESS		ADDRESS	The state of the same of the s
CITY-ST-ZIP	•			3.4. CI	TY-S1	T-ZIP	
TITLE			[]] DELETE	4.1 TIT	LE		☐ Change ☐ Addition
NAME	•			4.2 N	ME	1	
STREET ADDRESS 4.3 ST				REET	ADDRESS		
CITY-ST-ZIP				4.4 CF		r-ZiP	
TITLE			DELETE	5.1 TIT	LΕ		☐ Change ☐ Addition

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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ DELETE

Change

Addition