**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000065341

1. Corporation Name

JACK'S GUIDE SERVICE, INC.

## FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90188 033 \*\*\*150.00



Principal Place	of Business	Mailing Address					
1812 EAST EMMA STREET		1812 EAST EMMA STREET					
TAMPA FL 33610		TAMPA FL 33610				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	
						08/21/1995	
<b>6</b> Date of 12 Of	land of Divisionan	2s Mailing Address					ied For
	lace of Business	2a. Mailing Address			-		Applicable
<u> </u>	<del></del>	26 Suite Ant # oto				\$8.75 Ad	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Req	
22		City & State					
City & State		City & State				6. Election Campaign Financing S5.00 N Trust Fund Contribution Added to	•
23		28	Cou	untry			1 003
Zip	Country	Zip		и и		8. This corporation owes the current year Intangible	ΩNo
24	25		30	_		Personal Property Tax. Li Yes	
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registered Agent	
CON	IZALEZ DADDADA ANN			°'	Name		
Gonzalez, barbara ann 1812 east emma street				82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
IAM	PA FL 33610			83			
				84	City	85 Zip Co	de
					-	FL   "	
office or re agent. I a	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was au	ithorizec	a ov tn	e corporatio	oration submits this statement for the purpose of changing its re on's board of directors. I hereby accept the appointment as regi	şieleu
SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE:	Registered	d Agent s	ignature require	d when reinstating) DATE	
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	_
TITLE	D	☐ DELETE	1.1 TI	ITLE		Change	☐ Addition
NAME	Gonzalez, Barbara ann		1.2 N	AME			
STREET ADDRESS	1812 EAST EMMA STREET		1,3 51	TREET AL	DDRESS		
CITY-ST-ZIP	TAMPA FL 33610		1.4 C	HTY-ST-Z	ZIP		
TITLE	D	☐ DELETE	2.1 TI		-	Change	☐ Addition
NAME	GONZALEZ, JACK		2.2 N	AME			
ł .	1812 EAST EMMA STREET			TREET AL	DORESS	, · · · · · ·	
STREET ADDRESS	TAMPA FL 33610				1		
CITY-ST-ZIP	TAMPA PL 33010	☐ DELETE	3.1 11	CITY-ST-	ZIF	Change	Addition
TITLE	, .	₩ DETELE	3.1 11 3.2 N				
NAME	·				20220		
STREET ADDRESS				TREET A	ſ		
CITY-ST-ZIP			_	CITY-ST-	ZIP	☐ Change	Addition
πιε		☐ DELETE	4.1 TI			Change	
NAME		•	4.21	NAME	}		
STREET ADDRESS			4.3 5	TREET A	DDRES\$		
CITY-ST-ZIP			4.4 C	XTY-ST-Z	ZIP		
TITLE		☐ DELETE	5.1 TI	ITLE		☐ Change	Addition Addition
NAME			5.2 N	AME		•	
STREET ADDRESS			5.3 S	TREET A	DORESS		
CITY-ST-ZIP			5.4 C	CITY-ST-Z	ZIP		
TITLE		☐ DELETE	6.1 TI	ITLE		Change	☐ Addition
			6.2 N	IAME	Ì		
NAME				TREET A	DDRESS		
STREET ADDRESS							
CITY+ST-ZIP	1		6.4 C	XTY-ST-2	시 시		

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.