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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

**FILED** Feb 23 1998 8:00am Secretary of State

| J & M   | OIL, INC.  | 3000009744   | (*)                 |                            |  |  |  |    |
|---|--|--|---------------------|----------------------------|--|--|--|----|
| Principal Plac  | ce of Business   | Mailing Address  |                     |                            |  |  |  |    |
| •   |  |  | n.ee                |                            |  |  |  |    |
| 1023 SUEMAR DRIVE 1023 SUEMAR DRIVE DUNEDIN FL 34698 DUNEDIN FL 34698 |  |  |                     |                            |  |  |  |    |
|   | *****  |  |                     |                            |  | DO NOT WRITE IN THIS   | SPACE  |    |
|   |  |  |                     |                            |  | 3. Date Incorporated or Qualified  |  | ٦  |
| 2. Principal f  | Place of Business  | 2a. Mailing Addre  | 9.0                 |                            |  | 09/11/1995<br>4. FEI Number  | Analised Fac.                                      |    |
| 21  |  | <u></u> ⊢¬   | 26                  |                            |  | 59-3337614   | Applied For<br>Not Applicable                      |    |
| Suite, Apt  | #, etc.  |  | Suite, Apt. #, etc. |                            |  |  | \$8.75 Additional                                  | ٦  |
| 22  |  | 27   | 27                  |                            |  | 5. Certificate of Status Desired   | Fee Required                                       | 1  |
| City & Sta  | te   | City & State   | City & State        |                            |  | 6. Election Campaign Financing   | \$5.00 May Be                                      |    |
| 23  | <del></del>  | 28   | <u> </u>            |                            |  | Trust Fund Contribution  | Added to Fees                                      | _  |
| Zip   | Country  | <b>—</b>   | Zip Cou             |                            |  | 8. This corporation owes or has paid the ci  |  |    |
| 26     26     9. Name and Address of Curren                           |  | 29 29 Current Registered Agent   |                     |                            |  | Personal Property Tax due June 30. Yes !!  10. Name and Address of New Registered Agent          |  | 4  |
| BO.   | UTZOUKAS, MICHAEL I  |  |                     | 81                         | Name                                     | IV. Name and Addies of feet negletelet   | Agont  | Ⅎ  |
|   | 4 WEST BAY STREET  | <u> </u>   |                     |                            |  |  | · · · · · · · · · · · · · · · · · · ·              | ╛  |
|   |  |  | 82                  | Street Addr                | ress (P.O. Box Number is Not Acceptable) |  |  |    |
| •   | MPA FL 33808   |  |                     | 83                         |  |  |  | ┨  |
|   |  |  |                     | 84                         | City                                     |  |  | 4  |
|   |  |  |                     | 04                         | City                                     | FI   | 85 Zip Code  |    |
| office or agent. I a  | to the provisions of Section registered agent, or both, in am familiar with and accept | ns 607.0502 and 607.1508, Florid<br>in the State of Florida, Such chanc<br>the objections of Section 607.0 |                     |                            |  | poration submits this statement for the purpose ion's board of directors. I hereby accept the ap | of changing its registered pointment as registered |    |
| 12.   | OFF  | ICERS AND DIRECTORS  |                     | sterea Agent<br>13.        | s-gnalure requir                         | ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN                                       | D DIRECTORS IN 12                                  | -1 |
| TITLE   | D  | DEL  |                     | 1.1 TITLE                  |  | ADDITIONAL OF TO OF TOLING ALL   | Change Addition                                    | 1  |
| NAME  | PALLAS, JAMES  |  | 1,                  | 1.2 NAME                   |  |  |  | ;  |
| STREET ADDRESS  | 1023 SUEMAR DRIVE  |  | 13                  |                            | DDRESS                                   |  |  |    |
| CITY-ST-ZIP   | <b>DUNEDIN FL 34698</b>  |  | 12                  |                            | ZIP                                      | •  |  |    |
| TITLE   | D DELETE   |  | TE 2                | 2.1 TITLE                  |  |  | Change Addition                                    | 78 |
| NAME  | VLAMAKIS, MICHAEL  |  | 2                   | 2.2 NAME                   | l  |  |  |    |
| STREET ADDRESS  | 2004 DREW STREET   |  | 2                   | 3 STREET AL                | DRESS                                    |  |  | 1  |
| CITY-ST-ZIP   | CLEARWATER FL 34   |  |                     | 2. 4 CITY-ST-ZIP           |  |  | ☐ Change ☐ Addition                                | 4  |
| TITLE   |  |  | 3.1 TITLE           |                            | ☐ Change                                 |  |  |    |
| NAME<br>CTREET ADDRESS  |  |  |                     | 3.2 NAME                   |  |  |  |    |
| STREET ADDRESS  |  |  |                     | 1.3 STREET AL              |  |  | •  |    |
| CITY-ST-ZIP<br>TITLE  | -  | DEL DEL  |                     | I.4. CITY-ST-<br>I.1 TITLE | ZIP                                      |  | Change Addition                                    | 4  |
| NAME  |  | ے عدد  |                     | . 2 NAME                   |  |  | C change C Addition                                |    |
| STREET ADDRESS  |  |  | •                   | .3 STREET AC               | DRESS                                    |  |  | -  |
| CITY-ST-ZIP   |  |  |                     | .4 CITY-ST-                | ľ  |  |  |    |
| TITLE   | <del></del>  |  |                     | 1 TITLE                    |  |  | ☐ Change ☐ Addition                                | 1  |
| NAME  |  |  |                     | 2 NAME                     |  |  |  |    |
| STREET ADDRESS  |  |  |                     | .3 STREET AD               | DRESS                                    |  |  |    |
| CITY-ST-ZIP   |  |  |                     | 4 CITY-ST-                 | - 1                                      |  |  |    |
| TITLE   |  | ☐ DEL  |                     | .1 TITLE                   |  |  | ☐ Change ☐ Addition                                | 1  |
| NAME  |  |  | 6.                  | .2 NAME                    | ĺ  |  |  |    |
| STREET ADDRESS  |  |  | 6                   | 3 STREET AD                | DRESS                                    |  |  |    |
| CITY-ST-ZIP   |  |  | 6.                  | A CITY-ST-2                | IP .                                     |  |  | 1  |

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 areachment with an address.

211-98 (813)446-7207