## 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** 

P95000070372 (4) DOCUMENT #

**FILED** Mar 26 1998 8:00am Secretary of State

J G SERVICES INC. Principal Place of Business Mailing Address 3121 N.W. 47H TERR 3121 N.W. 47H TERR LAUDERDALE LAKES FL 33319 LAUDERDALE LAKES FL 33319 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/13/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0609721 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country Zip Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **GOLDSTEIN, GERALD** Name 3121 N.W. 47TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) #112 83 LAUDERDALE LAKES FL 33319 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition **GOLDSTEIN, GERALD** NAME 12 NAME CR2E034 3121 N.W. 47TH TERR STREET ADORESS 1.3 STREET ADDRESS LAUDERDALE LAKES FL 33319 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-S1-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change \_\_ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP CITY-\$T-ZIP DELETE TITLE 6.1 TITLE Change \_\_\_ Addition 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

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 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 enpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if granged, by the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee enpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if granged, by the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee enpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if granged, by the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee enpowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on this annual report is supplied to the corporation of the

SIGNATURE:

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