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

Mailing Address

3121 N.W. 47H TERR

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000070372 1. Corporation Name

J G SERVICES INC.

Principal Place of Business

3121 N.W. 47H TERR

#112 DO NOT WRITE IN THIS SPACE LAUDERDALE LAKES FL 33319 LAUDERDALE LAKES FL 33319 3. Date Incorporated or Qualifed 09/13/1995 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 21 26 65-0609721 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Zip Country 8. This corporation owes the current year Intangible ☐ Yes □No Personal Property Tax. 25 30 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GOLDSTEIN, GERALD** 82 Street Address (P.O. Box Number is Not Acceptable) 3121 N.W. 47TH TERRACE #112 83 LAUDERDALE LAKES FL 33319 84 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 conference of the purpose of changing its registered composed 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. □ DELETE Addition 1.1 TITLE ☐ Change TITLE 55 (43 7/2) NAME GOLDSTEIN, GERALD 1.2 NAME STREET ADDRESS 3121 N.W. 47TH TERR 1.3 STREET ADDRESS LAUDERDALE LAKES FL 33319 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ DELETE ☐ Addition 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition ☐ Change TITLE 31 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP □ DELETE Change Addition TITLE 4.1 TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE . Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE 6.1 TITLE Change Addition TITLE 62 NAME

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

**FILED** 

Feb 12, 1999 8:00am

**Secretary of State** 

02-12-1999 90002 011 \*\*\*150.00

CR2E034 (11/98)