## 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

DOCUMENT # P95000074049 (4)

JGH, INC.

## FILED May 08 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address					İ			1010 1011 1001	
	BOULEVARD #E	19941 GULF BOULEVARD							
INDIAN SHORES FL 33785		INDIAN SHORES FL 34635				DO NOT WRITE IN THIS SPACE			
US					1	3. Date Incorporated or Qualified			
					'	09/21/1995		1	
2 Principal F	Place of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-3339153	-	ot Applicable	
Suite, Apt	#. etc.	Suite, Apt. #, etc.				_		Additional	
22	• •	27			ı	5. Certificate of Status Desired		Required	
City & Sta	te	City & State			<del></del> -	Election Campaign Financing		D May Be	
23		28				Trust Fund Contribution		to Fees	
Zip	Country	Zip Country				8. This corporation owes or has paid the cur			
24	25	29	30					□ No	
	g. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	Agent		
Н	ASTINGS, DAVID C			81	Name				
	941 GULF BOULEVARD #E		}	82	Ctroot Address	ss (P.Q. Box Number is Not Acceptable)			
	DIAN SHORES FL 33785			02	Sheet World:	s (F.O. Box Number is Not Acceptable)			
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			L.				17		
			[1	84	City	FL	<b>85</b> Zip	Code	
11. Pursuant	to the provisions of Sections 607.050.	2 and 607 1508, Florida Statut	es, the ab	ove-	named corpor	ation submits this statement for the purpose of	changing	its registered	
office or	registered agent, or both, in the State	of Florida, Such change was a stions of Section 607,0505, Ft	authorized	l by i	the corporatio	ation submits this statement for the purpose of n's board of directors. I hereby accept the app	ointment a	s registered	
	arritarina with and accopi the congr	2110/13 07, 00011011 007.0000, 17	orido oldic					1	
SIGNATURE	Signature, typed or privited name of registered age	nt and title it appricable (NO1	E Registered	Agent	signatura required	when reinstating) DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	I DP	☐ DELETE	1.1 TITU	LE			Change	☐ Addition	
NAME	HASTINGS, DAVID C		1.2 NA	ME					
STREET ADDRESS	19941 GULF BOULEVARD #E		1.3 STR	REETA	DDRESS			1	
CITY-ST-ZIP	INDIAN SHORES FL		1.4 CIT	Y-ST-	ZIP				
TITLE	ST	☐ DELETE	2.1 TITL	LE .			Change	Addition	
NAME	HASTINGS, JOSEFA G		2 2 NA	<b>NE</b>					
STREET ADDRESS	19941 GULF BOULEVARD #E		23 STR	EET A	DORESS			Ĭ	
CITY-ST-ZIP	INDIAN SHORES FL		2. 4 C/T	Y-ST	- ZIP	b. *			
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NAME	Ĺ		3.2 NAM	Æ	Į			l	
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NAME			4.2 NA	ME	}			}	
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City - St - ZIP	<b>\</b>		4.4 CIT		ľ			}	
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NAME	1		5.2 NAA		}		•	· · · · · · · · · · · · · · · · · · ·	
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STREET ADDRESS			6.3 STR		nnpecc			f	
STREET AUTUMESS	1		0.3 SIK					j	

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 roceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attactment with an address

SIGNATURE:

GNATURE AND TYPED OR PHINTED NAME OF BE

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Daytime Phone # 04