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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P95000080033 (0) **DOCUMENT #**

## **FILED** Jan 20 1998 8:00am Secretary of State

JARROD ENTERPRISES, INC.	
	OLOH HERRE ODERH ODINO PRIED BERE ERDA
Principal Place of Business Mailing Address : 23110 S.R. 54 23110 S.R. 54	
LUTZ FL 33549 LUTZ FL 33549 DO NOT WRITE IN	THIS SPACE
3. Date Incorporated or Qualified	
10/16/1995	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
26 59-3343145	Not Applicable
Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State 6. Election Campaign Financing	<b>\$5.00</b> May Be
23 Trust Fund Contribution	
Zip Country Zip Country 8. This corporation owes or has paid the composition of the corporation of the corpo	
24 25 29 30 Personal Property Tax due June 30.  9. Name and Address of Current Registered Agent 10. Name and Address of New Register	
MOHAMMED, EM 81 Name	
23110 S.R. 54  82 Street Address (P.O. Box Number is Not Acceptable)	
LUTZ FL 33549	
84 City	FL 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 purp 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	pose of changing its registered ne appointment as registered
SIGNATURE	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling)	DATE
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  P  DELETE  1.1 TITLE	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  P  MOHAMMED, EM  1.2 NAME  1.2 NAME	S AND DIRECTORS IN 12
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME  NAME  NAME  STREET ADDRESS  1165 WISPER RUN CT.  1.2 STREET ADDRESS	S AND DIRECTORS IN 12
12. OFFICERS AND DIRECTORS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  13. ADDITIONS/CHANGES TO OFFICER  1.1 TITLE  MOHAMMED, EM  1.2 NAME  1.3 STREET ADDRESS  LUTZ FL 33549  1.4 CITY-ST-ZIP	S AND DIRECTORS IN 12  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VIDE DELETE  DELETE  1.1 TITLE  MOHAMMED, EM  1.2 NAME  1.2 NAME  1.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  VIDE DELETE  DELETE  2.1 TITLE  VIDE DELETE  2.1 TITLE  VIDE DELETE  2.1 TITLE  VIDE DELETE  2.1 TITLE  VIDE DELETE  2.1 TITLE	S AND DIRECTORS IN 12
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  V  NAME KIPP, RENEE E  NAME  NAME KIPP, RENEE E  NAME  NAME	S AND DIRECTORS IN 12  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  MOHAMMED, EM  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  KIPP, RENEE E  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  LUTZ FL 33549  DELETE  DELETE  1.1 TITLE  1.2 NAME  1.2 STREET ADDRESS  LUTZ FL 33549  DELETE  2.1 TITLE  KIPP, RENEE E  STREET ADDRESS  STREET ADDRESS  LUTZ FL 33540  DELETE  2.2 NAME  STREET ADDRESS  LUTZ FL 33540  LUTZ FL 33540  DELETE  2.3 STREET ADDRESS  LUTZ FL 33540	S AND DIRECTORS IN 12  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  LUTZ FL 33549	S AND DIRECTORS IN 12  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  DELETE  1.1 TITLE  1.2 NAME 1.2 NAME 2.1 TITLE  2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE  DELETE 3.1 TITLE  DELETE 3.1 TITLE	S AND DIRECTORS IN 12  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  DELETE  1.1 TITLE  1.2 NAME 1.2 NAME 2.2 NAME 2.2 NAME 3.2 NAME 3.2 NAME 3.2 NAME	S AND DIRECTORS IN 12  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS	S AND DIRECTORS IN 12  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  MOHAMMED, EM  1165 WISPER RUN CT.  LUTZ FL 33549  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  3.4 CITY-ST-ZIP	S AND DIRECTORS IN 12  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  TITLE NAME STREET ADDRESS CITY-ST-ZIP	S AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  MOHAMMED, EM  1165 WISPER RUN CT.  LUTZ FL 33549  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  KIPP, RENEE E  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  A1 TITLE  DELETE  A1 TITLE  DELETE  A1 TITLE  A2 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  A4 TITLE  A1 TITLE	S AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME  DELETE  A.1 TITLE  NAME  A.2 NAME  4.2 NAME  4.2 NAME	S AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	S AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  NAME  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  AL TITLE  A.3 STREET ADDRESS  AL CITY-ST-ZIP  A.3 STREET ADDRESS  AL CITY-ST-ZIP  AL TITLE  A.3 STREET ADDRESS  AL CITY-ST-ZIP  A.3 STREET ADDRESS  AL CITY-ST-ZIP  AL TITLE  A.3 STREET ADDRESS  AL CITY-ST-ZIP  A.3 STREET ADDRESS  AL CITY-ST-ZIP	S AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
Signature, hyped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  NAME  NAME  NOHAMMED, EM  1165 WISPER RUN CT.  LUTZ FL 33549  1.4 CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  LUTZ FL 33549  1.4 CITY-ST-ZIP  LUTZ FL 33549  1.4 CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  LUTZ FL 33549  1.5 DELETE  1.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  AMME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  1.1 TITLE  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE	S AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
Signature, hyped or printed name of legistered agent and little if applicable. (NOTE, Registered Agent signature required when reinstating)   13.	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)   Title	S AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)   12.	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)   Title	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition

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.

1-9-98

813-948-2287