Applied For

\$8.75 Additional

Fee Required

Not Applicable

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P95000084608

1. Corporation Name

JRC INTERNATIONAL PRODUCTS, INC.

Principal Place of Business	Mailing Address
1251 MARINA POINT #203 CASSELBERRY FL 32707 US	1646 COMANCHE TRAIL MAITLAND FL 32751 US
2. Principal Place of Business 21 1251 MARINA Pt #853	2a. Mailing Address 26 1646 Com Anche TR.

27

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

10/30/1995 4. FEI Number

59-3375983

5. Certificate of Status Desired

**FILED** 

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90165 025 \*\*\*150.00

	<del>~~</del> J				45.00	
City & State	sselberry, FL	City & State  MATHAN	d, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 h Added to	
Zip	Country	Zip	<b>Country</b>	8. This corporation owes the current year	r Intangible	,
32	707 🛭 Seminole	29 32751 3	· ORANGE	Personal Property Tax.	☐ Yes I	<b>1</b> No
	9. Name and Address of Current F		1 10 11	10. Name and Address of New Registe	red Agent	
SHEPHARD, JEFFREY J SR. 1646 COMANCHE TRAIL MAITLAND FL 32751		81 Name 5 82 Street Add 1694 83	82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City 185 Zin Code			
			'7//		FL 👸 📆	751
office or n agent. I a	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida. Such change was auti	norized by the corporat	poration submits this statement for the purposion's board of directors. I hereby accept the a	e of changing its r ppointment as reg	registered istered
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. /NOTE: R	egistered Agent signature requir	ed when reinstating) DAT	E	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	RS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE		Change	☐ Addition
NAME	SHEPHARD, JEFFREY J SR.		1.2 NAME			ł
STREET ADDRESS	1646 COMANCHE TRAIL		1.3 STREET ADDRESS			
CITY-ST-ZIP	MAITLAND FL 32751		1.4 CITY-ST-ZIP	·		
TITLE	VSD	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	ratliff, franklin R.		2.2 NAME			
STREET ADDRESS	5090 HOPERITA ST		2.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO_FL 32812		2.4 CITY-ST-ZIP			
TITLE		DELETE	·3.1 TITLE - ^		Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			}
CITY-ST-ZIP			3.4. CITY-ST-ZIP			C A (distan
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition Ì
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 C/TY-ST-ZIP		Change	Addition
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Waguingir (
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME	Ì		6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	15 to 10 to	this files does not evelify for t	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I furthe	or certify that the in	oformation
14. I hereby (	certify that the information supplied with	this filing does not quality for t	ne exemption stated in	Section 119.07 (3)(1), Florida Statutes, Trumbers, et al. bayo the same legal effect as if made	under eath: 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.

SIGNATURE: