Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90015 030 ***150.00

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 # P95000085251

1. Corporation Name

JERRY CHERRY MARKETING, INC.

Principal Place of Business Mailing Address						r tobriode tie ening Hills Ante oblit Saist outer inin	1 101111	11 861 (1	(B) (186 188)
505 N MIRAMAR STREET #408 505 N MIRAMAR STREET #40 INDIALANTIC FL 32903 INDIALANTIC FL 32903						DO NOT WRITE IN THIS SP	MOF		
	<u>.</u>					3. Date Incorporated or Qualifed	ACE		
1						11/03/1995			ļ
2 Dinainal D	land of Punisage	2a. Mailing Address				1 1/03/1993 4. FEI Number	7	Anni	ed For
						59-3342723	Not Applicable		
26 Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 Additional		
22						5. Certifcate of Status Desired		e Requ	
City & State City & State					-	6. Election Campaign Financing	\$5.	00 м	ay Be
23		28				Trust Fund Contribution	Add	led to	Fees
Zip	Country	Zip	Counti	ry		8. This corporation owes the current year Intang		_	_
24	25	29	30			1 diddright topolity tax:	Yes]No
	9. Name and Address of Current	Registered Agent		-1		10. Name and Address of New Registered Ag	<u>ent</u>		
0.15	550 SERVICE		8	1	Name				
CHERRY, GERALD L				2	Street Addre	ess (P.O. Box Number is Not Acceptable)			
505 N MIRAMAR STREET #408				_					
INUI	ALANTIC FL 32903		8	3					
•			8	4	City	_	85	Zip Co	de
				_		FL /	<u></u>	- 14	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligat	of Florida. Such change was al	utnonzea b	ıv u	-named corpo the corporatio	oration submits this statement for the purpose of chain's board of directors. I' hereby accept the appointm	ient a	s regis	stered
SIGNATURE		ALOTE MANAGEMENT	. Donistarad Aa		eignature requires	d when reinstating) DATE			
12.	Signature, typed or printed name of registered agen OFFICERS AN		13.	jeen.	. signature required	ADDITIONS/CHANGES TO OFFICERS AND	DIRE	CTOR	\$ IN 12
TITLE	P	DELETE	1.1 TITLE				Char		Addition
NAME	CHERRY, GERLAD L		1.2 NAME	=	•				
STREET ADDRESS	505 N MIRAMAR STREET #408		1.3 STRE	ET /	ADDRESS				
CITY-ST-ZIP	INDIALANTIC FL		1.4 CITY-	·ST-	-ZIP				
TITLE	VP	☐ DELETE	2.1 TITLE] Cha	nge	☐ Addition
NAME	CHERRY, URSULA		2.2 NAME	<u>=</u>					
STREET ADDRESS	505 N MIRAMAR ST #408		2.3 STRE	ET A	ADDRESS				
CITY-ST-ZIP	INDIALANTIC FL		2. 4 CITY	-st	r-zip				
TITLE		☐ DELETE	3.1 TITLE	= -]] Chai	nge	☐ Addition
NAME			3.2 NAME	Ξ	1				
STREET ADDRESS	<u> </u>	•	3.3 STRE	ET/	ADDRESS	4			
CITY-ST-ZIP				3.4. CITY-ST-ZIP					
=mr.e======		☐ DELETE	4.1 TITLE	:			Chai	nge	Addition
NAME	·		4. 2 NAM	É					
STREET ADDRESS	•		4.3 STRE	ET/	ADDRESS				
CITY-ST-ZIP			4.4 CITY	ST_	-ZIP				
TITLE		☐ DELETE	5.1 TITLE				☐ Cha	nge	Addition
NAME			5.2 NAM						
STREET ADDRESS					ADDRESS				1
CITY-ST-ZIP			5.4 CITY		-ZIP				
TITLE		, □ DELETE	6.1 TITLE	Ξ		Ε	□ Cha	nge	☐ Addition

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 changes, of on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

OFFICER OR DIRECTOR