## 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 # P95000091969 (2)

J.D.G. LEASING-PHASE I, INC.

	- O'O'G' ECHOMOTTINGE () IN	<b>.</b>			
	Principal Place of Business	Mailing Address			
	5180 WEST ATLANTIC AVENUE DELRAY BEACH FL 33445	5180 WEST ATLANTIC AVENUE DELRAY BEACH FL 33445	DO NOT WRITE IN		
			<ol> <li>Date Incorporated or Qualified</li> <li>12/04/1995</li> </ol>		
	2. Principal Place of Business	2a. Mailing Address	4. FEI Number		
	21	26	65-0629399		
امعد	Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired		
	City & State	City & State	8. Election Campaign Financing		

**FILED** Jan 28 1998 8:00am Secretary of State



5180 WEST ATLANTIC AVENUE DELRAY BEACH FL 33445			5180 WEST ATLANTIC AVENUE DELRAY BEACH FL 33445		DO NOT WRITE IN THIS SPACE		
1					3. Date Incorporated or Qualified		
					12/04/1995		
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			65-0629399	Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional	
22		27			<b>5.</b> Certificate of Status Desired	Fee Required	
City & Sta	ite	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Žip	Country	Zip	Cour	try	8. This corporation owes or has paid the cr	urrent year Intangible	
24	25	29	30		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Cui	rent Hegistered Agent		u I	10. Name and Address of New Registered	I Agent	
	LINGS, INC.		·	11 Name			
	32 N.W. 16TH STREET		ļ,	Street Ac	dress (P.O. Box Number is Not Acceptable)		
<sub> </sub> FT	: Lauderdale fl 33311-413;	2	<u> </u>				
			1	13			
				4 City	FI	85 Zip Code	
Onice of	to the provisions of Sections 607.4 registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida, Such change was	authorized	by the cornol	orporation submits this statement for the purpose r ration's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
SIGNATURE			iorida Otato	.00.			
SIGNATORE	Signature, typed or printed name of registered	agont and title if applicable (NO	16: Registered	lgent signature rec	quired when reinstating) DATE.		
12.	OFFICERS :	AND DIRECTORS	13.	`	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITL			Change Addition	
NAME	GOLDSTEIN, JON D		1.2 NAM	E			
STREET ADDRESS	5180 WEST ATLANTIC AVE	NUE	1.3 \$TR	ET ADDRESS			
CITY-ST-ZIP	DELRAY BEACH FL 33445		1.4 City	- S1 - Z(P			
TITLE		☐ DELETE	2.1 TITL			Change Addition	
NAME			2.2 NAM	£			
STREET ADDRESS			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP			2, 4 0(1)	-ST-ZIP			
TITLE		DELETE	3.1 TITL			Change Addition	
NAME			3.2 NAM	E }			
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. C(T)				
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAN	E		<u> </u>	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			4 4 CITY				
TITLE		☐ DELETE	5 1 1 ITLE			Change Addition	
NAME			5.2 NAM	.			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		DILETE	6.1 TITLE			Change Addition	
NAME			6.2 NAM			FT Avende F Pagetion	
STREET ADDRESS				T ADDRESS			
CITY-ST-7IP	-		64 CITY	i i			

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 any agrees.