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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mertifam 🍾

Secretary of State Secretary of State DIVISION OF CORPORATIONS DOCUMENT # P-9500092561 1. Corporation Name: J& S Guardians. Inc. Principal Place of Business 13760 Citrus Grove Blud P.O. Box 210895 West Palm Beach 12 3342 DO NOT WRITE IN THIS SPACE West Palm Beach FL 33412 3. Date Incorporated or Qualified 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-06 32496 21 26 Not Applicable Suite. Apt #, etc Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent loyce M. Sanborn Street Address (P.O. Box Number is Not Acceptable)
13 760 Citrus Crove Zip Code 33442 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent. I am familial with and accept the obligations of, Section 607 0505, Florida Statutes. (NOTE Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 1.1 TITLE ☐ Change ☐ Addition 1.2 NAME 13 STREET ADDRESS STREET ADDRESS CITY-ST-7IP 1.4 CITY- ST- ZIP Change ☐ Addition 2.1 TITLE 2.2 NAME 2 3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 THEF NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 41 TITLE ☐ Change Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE ■ Addition 5 1 THE TITLE 5.2 NAMI NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - 2IP CITY - ST - ZIP 3000024604¹3° -03/18/98--01036--014 TITLE DELETE 6 1 TI'LE NAME

14. Thereby 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 supplied ratal annual report is true and accurate and that my signature shall have 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 of prantied, or or an attachment with an address.

SIGNATURE:

STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

***150.00

FILED

Mar 17 1998 8:00am

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