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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 03 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000093585 (4)

JASON DEVELOPMENT & ENTERTAINMENT CORP.

Mailing Address Principal Place of Business GRASSAND & COMPANY: PA. 1616 N FEDERAL IMY. 1515 N FEDERAL INGHWAY: GUITE 218 DO NOT WRITE IN THIS SPACE 800A RATON PL 33432 BOOM NATION FL -99492 3. Date Incorporated or Qualified 12/08/1995 Principal Place of Business Applied For 2a. Mailing Address 65-0629050 Not Applicable Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name FRAGETTA, WILLIAM A 301 YAMATO RD 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 4150** 83 **BOCA RATON FL 33431** 84 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 purpose of changing its registered 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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE 1.2 NAME KRAVETZ, JASON C NAME 19641 ISLAND CT DR STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33434** 1.4 CITY-ST-ZIP City-St-ZiF Change Addition DELETE TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST-ZIP Change Addition ☐ DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Channe Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 THILE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CiTY-ST-ZIP CITY-ST-ZIP 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/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 receive or hustre 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.

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