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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

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P9600000671 (3)

J & J SHELL, INC.

Principal Place of Business Mailing Address 4600 BAYLINE DRIVE % ROBERT ROYSTON NORTH FORT MYERS FL 33937 P.O. DRAWER 60205 DO NOT WRITE IN THIS SPACE FORT MYERS FL 33906 3. Date Incorporated or Qualified 01/02/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 65-0636864 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State Cily & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes 25 29 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 <del>royeton. Robert d Jr P.</del> NIGH 12070 NEW BRITTANY BLVD 82 Number is Not Acceptable) CUITE-101 83 FT MEYERS FL 33007 84 7.050 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered obligations of, Soction 607.0505, Florida Statules. 11. Pursuant to the provisions office or registered agent agent. I am familiar with, or both, in the **SIGNATURE** bie diapplicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change Addition ELI TITLE **DENICOLO. JOSEPH** NAME 1.2 NAME 444 RIVER CT STREET ADDRESS 1.3 STREET ADDRESS MARCO ISLAND FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change \_\_\_ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP

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 suppliemental 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 exployered to execute his 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.

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

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May 04 1998 8:00am

Secretary of State