## 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 # **P96000001276**1. Corporation Name

JBW ENGINEERING, INC.

## **FILED** Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90147 020 \*\*\*150.00



Principal Place	e of Business	Mailing Address							
7519 OAKVISTA CIR 7519 OAKVISTA CIR			₹						
TAMPA FL 33634		TAMPA FL 33634			DO'NO	T WRITE IN TH	IS SPACE		
						3. Date Incorporated or Qu		0.702	
						· ·	ialiiea		
						01/01/1996			plied For
2. Principal P	lace of Business	2a. Mailing Addres	SS			4. FEI Number	•	<b>├</b> ────	<u> </u>
21		26				<u>59-3351743</u>			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	etc.			5. Certificate of Status Des	ired 🔲	\$8.75 A	
22		27							<del></del>
City & Stat	6	City & State			-·	6. Election Campaign Fina	- 11	\$5.00	
23		28				Trust Fund Contribution Added to Fees			
Zip Country		Zip	Zip Country			8. This corporation owes the current year Intangible			
24 25		29 30				Personal Property Tax. Yes ANo			
	9. Name and Address of Cui	rrent Registered Agent				10. Name and Address of	New Registere	d Agent	
				81	Name				
	ttum, James B			82	Street Ado	iress (P.O. Box Number is Not	Acceptable)		<del></del>
7519	OAKVISTA CIR.		62 Street Ac			1000 (1:0. Box 11a			
TAM	PA FL 33634			83			-		
								[an] 7:-	C+d+
				84	City		F	85 Zip	Code
	to the provisions of Sections 607.	0500 1007 1500 Flid	- Ctatutan tho		o named cor	noration submits this statement	for the numose	of changing its	registered
						tion's board of directors. I hereb	y accept the ap	oointment as re	gistered
agent. I a	m familiar with, and accept the ob	oligations of, Section 607.05	505, Florida St	atutés	i. '				
SIGNATURE									
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable			nt signature requi	red when reinstating)	DATE	AND DIRECTO	NDC IN 12
12.	OFFICERS	AND DIRECTORS	1:			ADDITIONS/CHANGES	10 OFFICERS	Change	Addition
TITLE	D	☐ DE	LETE 1.1	TITLE	•			□ Change	☐ Addition
NAME	WHITTUM, JAMES B		1.2	NAME					
STREET ADDRESS	7519 OAKVISTA CIR		1.3	STREE	T ADDRESS				
CITY-ST-ZIP	TAMPA FL 33634		1.4	СПҮ-5	T-ZIP				
TITLE		☐ DE	LETE 2.1	TITLE				Change	☐ Addition
NAME			2.2	NAME					
STREET ADDRESS			2.3	STREE	T ADDRESS				
i	1			4 CITY-		- 1	•		
CITY-ST-ZIP		□ DE		TITLE			•,	Change	☐ Addition
TITLE		<b>_</b>		NAME		•		•	
NAME					TADDDECC				
STREET ADDRESS	3				TADDRESS				
CITY-ST-ZIP				CITY-	ST-ZIP		<del> </del>	Change	☐ Addition
TITLE		□ DE		TITLE					
NAME				2 NAME					
STREET ADDRESS	s		4.5	STREE	T ADDRESS				
CITY-ST-ZIP				CITY-S	ST-ZIP			Charre	Addition
TITLE		□ DE		TITLE				Change	☐ Worldon
NAME			5.3	2 NAME					
STREET ADDRESS			5.3	STREE	T ADDRESS				
CITY-ST-ZIP			5.	4 CITY-	ST-ZIP				
TITLE		□ DE	LETÉ 6.	TITLE				☐ Change	Addition Addition
		_		2 NAME					
NAME	1								
	_		6	3 STRFF	ET ADORESS				
STREET ADDRESS	3			3 STREE	ET ADORESS				

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 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, with all other like empowered.

SIGNATURE: