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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

FILED Mar 13 1998 8:00am

,	JAL REPORT 1998		Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
	MENT # P960(BY J & S SERVICES, IN	00005990 (2)					
LAWNS	DI J & O SEMVICES, IN	4 C.					
Principal Place	of Business	Mailing Address				Al Altin Ibili (Al	11 48 11 18 8 1
2280 AVOCADO AVE. UNIT #3 MELBOURNE FL 32935 US		P.O. BOX 360548 32836URNE FL 32835 US	32936URNE FL 32935		DO NOT WRITE IN THIS SPACE		
					S. Date Incorporated or Qualified		
2. Principal Pl	ace of Business	2a. Mailing Address			01/17/1996 4. FEI Number	Ar	plied For
21		26			59-3356888		t Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 A	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Country	7ip 29 30	Country โ		 This corporation owes or has paid the current Personal Property Tax due June 30. 		angible] No
24	25 Name and Address of Cur		1		10. Name and Address of New Registered		טאו ב
HU	NT, JIMMY D		81	Name			
2569 LEEWOOD BLVD.			82	Street Add	fress (P.O. Box Number is Not Acceptable)		
MELBOURNE FL 32935							
			83				
			84	City	FL	85 Zip (Code
11, Pursuant t	o the provisions of Sections 607 (0502 and 607, 1508, Florida Statutos,	the above	-named cor	poration submits this statement for the purpose of	f changing it	s registered
office or re agent. I ar	egistered agent, or both, in the Stam in familiar with, and accept the ob	ate of Horida. Such change was aut digations of, Section 607.0505, Floric	horized by Ja Statutes	the corpora	ition's board of directors. I hereby accept the app	pointment as	registered
SIGNATURE	<u>.</u>						
12.	Signature hyperd or pointed name of registered OFFICERS A	AND DIRECTORS	13.	nt signature requ	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	S IN 12
TITLE	D	DELETE	1.1 TITLE	 ,		Change	Addition
NAME	Hunt, Jimmy D		1.2 NAME				
STREET ADDRESS	2569 LEEWOOD BLVD.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	MELBOURNE FL 32935	Doute	1.4 CITY-ST	- ZIP		1 Observe	1714///
TITLE	D HINT ANDDEW I	DELETE 2.1 TI				Change	Addition
NAME STREET ADDRESS	ACAA LEMILAAN DILIN		2.2 NAME 2.3 STREET	1020000			
CITY-ST-ZIP	MELBOURNE FL 32935		2.3 STREET	1			
TITLE		DELETE	3.1 TITLE	1-211		Change	Addition
NAME]			3.2 NAME	1			
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY - S	t - ZIP		T 0	1.000
TITLE		☐ DELETE	4.1 THLE			Change	Addition
NAME CYPEET ACCOUNCE			4. 2 NAME	4DDDCCC			ļ
STREET ADDRESS CITY-ST-ZIP			4.3 STREET.				Ì
TITLE		DELETE	51 TITLE	ru .		Спапре	Addition
NAME			5.2 NAME	}			
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST	- ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			63 STREET	AUDRESS	•		ĺ

14. Thereby certify that the information supplied with this liling 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 seminal 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 coreporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.