

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

FILED  
Apr 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000025167 (3)

1. Corporation Name

JENNY ENTERPRISES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
6050 VERDE TRL S., STE. 404  
BOCA RATON FL 33433

Mailing Address

6050 VERDE TRL S., STE. 404  
BOCA RATON FL 33433

2. Principal Place of Business  
21 761 HARBOUR DR.  
Suite, Apt. #, etc.  
22  
City & State  
23 BOCA RATON FL  
Zip  
24 33431  
Country  
25 USA

2a. Mailing Address

26 761 HARBOUR DR.  
Suite, Apt. #, etc.  
27  
City & State  
28 BOCA RATON FL  
Zip  
29 33431  
Country  
30 USA

3. Date Incorporated or Qualified

03/18/1996

4. FEI Number

65-0652208

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MURO, IRIS  
6050 VERDE TRL S., STE. 404  
BOCA RATON FL 33433

81 Name

MURO, IRIS

82 Street Address (P.O. Box Number is Not Acceptable)

83 761 HARBOUR DR.

84 City BOCA RATON

FL

85 Zip Code

33431

11. Pursuant to the provisions of Sections 607.0505 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 file if applicable

JAMES MURO

(NOTE: Registered Agent signature required when reinstating)

DATE

4/11/98

12. OFFICERS AND DIRECTORS

TITLE D. ☐ DELETE  
NAME MURO, JAMES  
STREET ADDRESS 6050 VERDE TRL S., STE. 404  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D. ☐ DELETE  
NAME MURO, IRIS  
STREET ADDRESS 6050 VERDE TRL S., STE. 404  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D. ☒ Change ☐ Addition  
1.2 NAME MURO, JAMES  
1.3 STREET ADDRESS 761 HARBOUR DR.  
1.4 CITY-ST-ZIP BOCA RATON FL 33431

2.1 TITLE D. ☒ Change ☐ Addition  
2.2 NAME MURO, IRIS  
2.3 STREET ADDRESS 761 HARBOUR DR.  
2.4 CITY-ST-ZIP BOCA RATON FL 33431

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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 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.

SIGNATURE

Signature

4/11/98

CR2E034 (10/97)