PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000042936 (0)

J&B PROPERTY MANAGEMENT, INC.

APPROVEU AND FILED

97 JUL 25 AM 11:57

SECRETARY OF STATE TALLAHASSEE, FLORIDA



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Principal Place of Business Mailing Address					T TOBULDOS DIO COURT BUILL BOUIL ORS	A DOM DOM BALL	# # # # # # # # # # # # # # # # # # #		
1980 NORTH ATLANTIC AVENUE 1980 NORTH ATLANTIC AV									
SUITE 201	Na M. MANA	SUITE 201							
COCOA BEACH FL 32831 COCOA BEACH FL 32831			11		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report				
					3. Date Incorporated or Qualifie 05/13/1996	3a. Da	lie of Last H	eport	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For	
21 66 N. ATLANTIC AVE 26 66 N. AT			NTIC AVE		59-3387431		No	t Applicable	
Suite, Apt		Suite, Apt. #, etc.	 				\$8.75	Additional	
22 SUTTE	27 SUITE 201			5. Certificate of Status Desired		Fee Re	quired		
City & State		City & State			6. Election Campaign Financing	, _	\$5.00		
Zip		28 COCOA BEACH			Trust Fund Contribution	<u> </u>	Added t		
24 32931	Country	Zip 29 32931	Coun	ıry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
24 0000	9. Name and Address of Curren		30		10. Name and Address of New			00 [
WILLIAMS, ROBERT W 81 Name							- Goin		
	10 NORTH ATLANTIC AVENUE		_						
SUITE 201			Ē	82 Street Address (P.O. Box Number is Not Acceptable)					
COCOA BEACH FL 32931			9	66 N. ATLANTIC AVE					
00	OUR BEAUTI PE 3283 F			SU	ITE 201				
			8	4 City	201	FL		Code	
11 Pureuent t	to the provisions of Sections 607 050	2 and 607 1508. Florida Status	les the sho	vo.pamod.cor	COA BEACH reportation submits this statement for the		32	931	
i Office Of re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was	authorized :	hy tha cornors	ation's board of directors. I hereby ac	cept the app	ointment as	registered	
SIGNATURE									
				Igent signature requ	uired when reinstating)	DATE			
12.	D OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR Change	S IN 12	
NAME	WILLIAMS, ROBERT W	Occent	1.2 NAM						
STREET ADDRESS 1980 NORTH ATLANTIC AVENUE, SUITE 201				ET ADDRESS	900002 -07/30	<u>ದ್ದಾದ</u> :	# ###		
CITY-ST-ZIP	COCOA BEACH FL 32931	102, 00,12 201	1.5 STR		_U1/3C	// 5101 65.00	****16	104 C 00	
TITLE	D	DELETE	2.1 TITLI		क्राकृतका 1	<u> </u>	Change	Addition	
NAME	8TAZZONE, JOSEPH		2.2 NAM						
STREET ADDRESS 1980 NORTH ATLANTIC AVENUE, SUITE 201				ET ADDRESS					
CITY-ST-ZIP	COCOA BEACH FL 32931			-ST-ZIP				ŀ	
TITLE		☐ DELETÉ	3.1 TITLE		TO BE THE COLUMN TO THE COLUMN		Change	Addition	
NAME			3.2 NAM	Ε			•		
STREET ADDRESS			3.3 STRE	ET ADDRESS					
CITY-ST-ZIP	<u> </u>		3.4. C(T)	-ST-ZIP				İ	
TITLE		DELETE	4.1 TITLE				Change	Addition	
NAME			4. 2 NAM	IE					
STREET ADDRESS			4.3 STRE	ET ADDRESS					
CITY-ST-ZIP			4.4 CITY	-ST-ZIP					
TITLE		DELETE	5.1 TITLE				Change	Addition	
NAME			5.2 NAM	E	١. ٨				
STREET ADDRESS			5.3 STRE	ET ADDRESS	va 2/28			1	
CITY-ST-ZIP			5.4 CITY	- ST - ZIP	Wille				
TITLE		DELETE	6.1 TITLE		7		Change	Addition	
NAME		•	6.2 NAM	E					
STREET ADDRESS	•	_	6.3 STRE	ET ADDRESS	halisan la annat na	۵			
CITY-ST-ZIP		\mathcal{A}	64 CITY	-ST-ZIP	btice not receive	<u> </u>			

Ang does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the fall annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that er or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I do hereby certify that the intornation su information indicated on this straual repo-I am an officer or director of the corporti appears in Block 12 or Block 13 if change pnent with an address.

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