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Feb 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000060918 (5)

1. Corporation Name
JEA HEALTHCARE CONSULTANTS, INCORPORATED



Principal Place of Business

3672 N.W. 83RD LANE
SUNRISE FL 33351

Mailing Address

3672 N.W. 83RD LANE
SUNRISE FL 33351-1132

3. Date Incorporated or Qualified 07/19/1996
3a. Date of Last Report

2. Principal Place of Business
21 6601 NW 4th Ct
Suite, Apt. #, etc.
22
23 City & State Plantation FL
24 Zip 33317
Country Broward
25
26 6601 NW 4th Ct
Suite, Apt. #, etc.
27
28 City & State Plantation FL
29 Zip 33317
Country Broward
30

4. FEI Number 65-0690771
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

AZOULAY, JOHNETTE ELIZABETH
3672 N.W. 83RD LANE
SUNRISE FL 33351

Betancourt, Johnette Tacker
6601 NW 4th Ct
Plantation, FL
33317

*Same agent newly married - name change

10. Name and Address of New Registered Agent

81 Name

TACKER

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 *Johnette Tacker - Betancourt* *Johnette Tacker - Betancourt* *2/5/97*
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PCEO
NAME AZOULAY, JOHNETTE ELIZABETH
STREET ADDRESS 3672 N.W. 83RD LANE
CITY - ST - ZIP SUNRISE FL 33351

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PCEO
1.2 NAME Betancourt, Johnette Tacker
1.3 STREET ADDRESS 6601 NW 4th Ct
1.4 CITY - ST - ZIP Plantation, FL 33317

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

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

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

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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: *Johnette Tacker - Betancourt* *Johnette Tacker - Betancourt* *2/5/97* *(934)* *327-7212*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)