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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # P96000065012

JLH INTERNATIONAL OF FLORIDA, INC.

Mailine Address

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90046 048 ***150.00



Principal Place	e or pusiness	1410	aling Address						
3055 SOUTHEAST ST. LUCIE BLVD. STUART FL 34997			3055 SOUTHEAST ST. LUCIE BLVD. STUART FL 34997				DO NOT WRITE IN THIS S	SPACE	
							3. Date Incorporated or Qualifed	•	
							08/02/1996		
2 Principal P	lace of Business	2a.	Mailing Address			_	4. FEI Number	1	Applied For
2. Fincipal (ace of business	26	Maining / tour our				65-0697558	├	Not Applicable
Suite, Apt.	# oto	26	Suite, Apt. #, etc.				05 0037 550		5 Additional
22 Suite, Apr.	#, e tc.	27	Conte, Apr. A, cic.				5. Certificate of Status Desired		Required
City & Stat	e		City & State		٠.	-	6. Election Campaign Financing		0 May Be
23	•	28					Trust Fund Contribution	Adde	ed to Fees
Zip	Country		Zip	Cou	ıntry		8. This corporation owes the current year Intar	ngible	1
24	25	29		30			Personal Property Tax.	Yes	No
···	9. Name and Address of Curre	nt Regis	tered Agent		Γ		10. Name and Address of New Registered A	gent	<u> </u>
					81	Name			
HEL	d, janet						(D.O. B. M. M. Assaylahla)		
3055 SOUTHEAST ST. LUCIE BLVD.					82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	ART FL 34997				83			~~~	
0.0									
					84	City	FL	85 Z	ip Code
					ĻJ			l l	its registered
11. Pursuant	to the provisions of Sections 607.05	02 and 60 Lof Florid	07.1508, Florida Statut la: Such change was a	es, the a uthorize	ibove d by	e-named corp the corporati	poration submits this statement for the purpose of con's board of directors. I hereby accept the appoint	ment as	registered
agent. I a	m familiar with, and accept the oblig	ations of,	Section 607.0505, Flo	rida Stat	tutes.		and board or through the appropriate appro		
SIGNATURE									
JORATORE	Signature, typed or printed name of registered age	ent and title i	if applicable. (NOTE	Registered	i Agen	signature require	ed when reinstating) DATE		
12.	OFFICERS A	ND DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PT		□ DELETE	1.1 T	TLE			Chang	ge 🗌 Addition
NAME	HELD, JANET L			1.2 N	AME				
STREET ADDRESS	3055 SOUTHEAST ST. LUCIE	BLVD.		1.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	STUART FL			140	ITY-\$1	-zip			Ì
TITLE	SV		DELETE	2.1 T				☐ Chang	ge 🔲 Addition
	HELD, DONALD J			2.2 N					
NAME		DI VID				ADDRESS			
STREET ADDRESS		DLVU.							
CITY-ST-ZIP	STUART FL		□ pri ett	_	CITY-S	T-ZIP		Chang	ge Addition
TITLE			☐ DELETE	3.1 T		-	•	- June	ge
NAME				3.2 N	AME				
STREET ADDRESS				3.3 S	TREET	ADDRESS			
CITY-ST-ZIP				3.4. 0	STY-S	T-ZIP			
TITLE			☐ DELETE	4.1 T	MLE			Chang	ge 📋 Addition
NAME				4.21	AME				
STREET ADDRESS				4.3 S	TREET	ADDRESS			
CITY-ST-ZIP	· •				ITY-SI				
TITLE			☐ DELETE	5.1 T				Chang	ge 🔲 Addition
	24			5.2 N					
NAME						ADDRESS			Ì
STREET ADDRESS	\			•	ITY-S1				
CITY+ST-ZIP			☐ DELETE	6.1 T				Chan	ge Addition
TITLE			L. VELETE	ı				L.J Onani	84 CT Vagabou
NAME	J			62 N			•		Į.
STREET ADDRESS	·			6.3 S	TREET	ADDRESS			
CITY OT 710	}			6.4 0	ITY-ST	r-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 any attachment with an address, with all other like empowered.

SIGNATURE: