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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90009 006 ***150.00

DOCUMENT # **P96000071899**1. Corporation Name

Corporation Name
 JESCO, INC.

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Principal Place	of Business	Mailing Address					43 33 44	1 1888: 11881 (4118	18419 1911 1881 4	
101 ST LUCIE LANE COCCOA BEACH FL 32931 COCCOA BEACH FL 32931										
NEW						DO NOT WRITE IN THIS SPACE				
,	ADDRESS	III MAA	eras Evv			3. Date Incorporated or Qualif	ed			į
	220 N. ATLANTIC AVE 2-Catavaveral Fl. 22020		₩ ₩	A 1.45		08/27/1996			.	
2. Principal II	E-GVENAVERAL FL 33920	2a. Mailing Address		SAS		4. FEI Number		— — —	plied For	Í
21		26 CAPE CANAVE	recipe to	643	USU .	59-1678286			t Applicable	
≟ ⇒ Suite,:Apt≃l	t.etc:	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A Fee Re		
City & State	•	City & State				6. Election Campaign Financir	^{ng} □	\$5.00	•	ĺ
23		28				Trust Fund Contribution		Added to	o Fees	ĺ
Zip	Country	Zip	Coun	itry		8. This corporation owes the o	urrent year li		_	Ĺ
24	25	29	30			Personal Property Tax.			□No	l
	9. Name and Address of Current	Registered Agent		 1		10. Name and Address of Ne	w Registere	d Agent		l
ROS	S, JESSE • •				Name					l
	ST LUCIE LANE	NEW	-	82	Street Addres	ss (P.O. Box Number is Not Acce	eptable)			
COC	OA BEACH FL 32931	ADDRESS N. ATLANTIC AND	Γ	83		•				
•	gape c	n atlantic ave Anaveral, Fl 320	200	84	City .		F	85 Zip (Code	
office or re	to the provisions of Sections 607.0502 sgistered agent, or both, in the State on m familiar with, and accept the obligation	f Florida. Such change was ons of, Section 607.0505, Fl	authorized orida Statu	by th	ne corporation	is board of directors, i hereby ac	cept trie app	of changing its cintment as re	registered gistered	
0.0.0	Signature, typed or printed name of registered agent	. '' 		Agent s	signature required v		DATE	ND DIDECTO	DC IN 42	Í
12.	OFFICERS AND		13.		<u> </u>	ADDITIONS/CHANGES TO	OFFICERS A	Change	Addition	3
TITLE	D	LOGLETE 1.17			-			☐ Criainge		13
NAME	ROSS, JESSE	ADDRESS	1.2 NA	ΚE						8
STREET ADDRESS	101 ST LUCIE LANE	6290 M. ATLANTIA	ESS 12 NAMI		DDRESS					į
CITY-ST-ZIP	COCOA BEACH FL 32931	APE CANAVERAL			ZIP			Change	() Addition	1 8
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NAME			2.2 NAI					<i>-</i>		_
STREET ADDRESS	,				DDRESS					
CITY-ST-ZIP		[] 85: 575	2.4 CIT		ZIP			Change	Addition	ł
πLE		☐ DELETE	3.1 TIT							1
NAME			3.2 NA							
STREET ADDRESS					IDDRESS					Ì
CITY-ST-ZIP			_	3.4. CITY-ST-ZIP				Change	Addition	1
TITLE		□ DELETE						□ cuange		
NAME			4. 2 NA				•			Ì
STREET ADDRESS					DORESS					ļ
CITY-ST-ZiP			4.4 CIT		ZIP			Chanca	Addition	ł
TITLE			5.1 TITT					☐ Change	L.J Addidon	
NAME			5.2 NA							
STREET ADDRESS			5.3 STF	KEET A	DDRESS		_			

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exe hotion stated in Section 119 indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have officer or director of the corporation or the receiver or trustee empowered to execute his report as required by 6 Block 12 or Block 13 if changed, or on an attachment with an appreciate with all other like empowered.

DELETE

SIGNATURE: WONAYOHE KEQUIRE

ofatutes. I further certify that the information of effect as if made under oath; that I am an orida Statutes; and that my name appears in

Change

☐ Addition

Daytime Ph

R2E034 (11/98)