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 13, 1999 8:00 am Secretary of State

04-13-1999 90025 028 ***196.88

DOCUMENT

-1-Corporation	Name P96000	0/2025			
J	WIDE CLEANING SERVICE	INC.			
OOOM	******		•		
Principal Place	e of Business	Mailing Address		I 10014601 IIO (DIJO ADIE) MOITI WORLD BREIL SO	TITL TOLEN TIONS SOLVE THERE WITH LOUS
2331 GULFSTRE	EAM DR	2331 GULFSTREAM DR			
MIRAMAR FL 33023 MIRAMAR FL 33023					un ontor
U\$ U\$				DO NOT WRITE IN THE	IIS SPACE
			•	08/29/1996	
Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
2. Frincipal F	lace of business	26		65-0696469	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
22 27		, .	5. Certifcate of Status Desired	Fee Required	
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23	·	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25		30	Personal Property Tax.	Yes No
	9 Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
TURNBULL, JAMES JR					
2331 GULFSTREAM DR		82 Street Ad	idress (P.O. Box Number is Not Acceptable)		
MIRAMAR FL 33023			83		
	Wild T L GOODS		[5]		
			84 City		85 Zip Code
44 Bumuant	to the provisions of Sections 607 050	2 and 607 1508 Florida Statute	s the above-named co	proporation submits this statement for the purpose	of changing its registered
office of r	egistered agent, or both, in the State	of Florida Such charge was au	thorized by the corpor	orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment as registered
l %	ovramiliar with, and accept the golfga	tions of, section/out/.usus, Flori	ida Statutes.	4-1 99	i
SIGNATURE	Signature hyper or printed name of registered ager	nt and title if applicable. (NOTE:	Registered Agent signature req	uired when reinstating) DATE	<u>-</u>
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	0/	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	TURNBULL, JAMES JR		1.2 NAME		
STREET ADDRESS	2720 LAGUNA WAY		1.3 STREET ADDRESS	.*	
CITY-ST-ZIP	MIRAMAR FL 33025		1.4 CITY-ST-ZIP	and the second s	Change Addition
TITLE		☐ DELETE	2.1 TTLE		
NAME		•	2.2 NAME		•
STREET ADDRESS		•	2.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE			3.1 TITLE	₹	C) Gillange C, ricerion
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY- ST- ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	·		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	•	
STREET ADDRESS			6.3 STREET ADDRESS	•	
OTT / OT 710			64 CITY-ST-Z/P	•	

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 of suppliemental 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, with all option like empowered.

SIGNATURE