2416617

PROFIT *CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

> Secretary of State DIVISION OF CORPORATIONS

1999 P96000080271 [**DOCUMENT #**

1. Corporation Name

FILED	
May 04, 1999 8:00 an	n
Secretary of State	
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05-04-1999 90070 021 ***150.00

J2	Developments Corp.	•						
Principal Place	o of Purposes	Mailing Address						
	C/o Daszkal Bolton	Maining / Ioux occ				1.		
	240 W. Palmetto Pk. I	27 52-7						
						DO NOT WRITE II	V THIS SPACE	
В	Boca Raton, FL 33432	<u> </u>				3. Date Incorporated or Qualifed]
						9/27/96		
2. Principal Pi	lace of Business	Za. Mailing Address				4. FEI Number		Applied For j
1 C/O Daszkal Bolton 26 C/o Daszkal Bol				വാ.		65-0737558		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		Addwonal Required
	2 240 W. Palmetto Pk. Blvd. 27 240 W. Palmet				. Blvd.	6. Election Campaign Financing	\$5.0	O May Be
City & State		· ·				Trust Fund Contribution		d to Fees
Boca R	aton, FL	28 Boca Raton,	EL	trv		This corporation owes the current year.		0.000
- Ζιρ ;₄ 33432	Country 25 USA	Zip 29 33432 3	`	SA		Personal Property Tax.	Yes	XINo
14 33434	[23]		01 05			10. Name and Address of New Regis	L 440 - 471 7	
	9. Name and Address of Current	Registered Agent		81	Name			
			L		1	Mitchell T. McRae		
	McRae	i i i i i i i i i i i i i i i i i i i	[1	62		ss (P.O. Box Number is Not Acceptable)		
	lades Road, Suite 40			<u>83</u>	23003	South State Road 7		
Boca R	aton, Florida 33431		'	83			*:	
			1	84	Слу		85 Z	p Code
-140					Boca	Raton	FL	33428
office or n agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and sotopt he objigation	and 607,1508, Florida Statutes of Florida Such change was auto ons of, Section 607,0505, Florida of Such and Su	, the abo norized t la Statut	ove by t les.	-named corpo the corporation	oration submits this statement for the purph's board of directors. I hereby accept the	pose of changing a appointment as 4/22/9	
SIGNATURE	Signature, typed or printed name of registered agent	and the Pappinshie. (NOTE: R	A cenetage	lgent	Behaper enumera	41-417-17-199	DATE	4-
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE		
TITLE	Director	Ú DELETE	1.1 TeTL	E			☐ Cháng	ie ∐ Vągi⊒ou
NAME	Jerry Schiff		1.2 NA	ΔŒ				
STREET ADDRESS	C/o 1400 Centre Par	k Blvd # 1000	13 STR	EET	ADDRESS			
CITY-ST-ZiP	West Palm Beach, FL		1.4 GITS	Y- ST	-212			
TITLE	West raim peach, ri	DELETE	2 1 TITL	E			Chang	a 🗀 Addition
NAME			2.2 NAM	иE				
STREET ADDRESS			23 \$TR	EET	ADDRESS		٠	
CITY-ST-ZiP			2.4 CIT	Y-51	T-ZIP			
TITLE	☐ DELETE			.Σ			[] Chang	je 🔲 Apcition
NAME		-	32 NAN	-			- .	•
STREET ADDRESS			3.3 STR	EET.	ADDRESS			
			3.4. CIT					
CITY-ST-ZIP TITUE		□ DELETE	4.1 Tijl		· 		Chang	e 🔲 Addition
		<u></u>	4. 2 NA					
NAME					ADDRESS			
STREET ADDRESS		•	4.4 CIT		- 1			
087-81-∑₽		☐ DELETE	5.1 Till		-445		☐ Chang	je 🔲 Addition
TITLE			A 201 1117					_

CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutea. I further certify that the information indicated on this annual report of supplimental annual riport 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 tristee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on all attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CiTY-ST-ZIP

54 CITY-ST-2IP

61 TITLE

62 NAME

DELETE

SIGNATURE:

NAME

TITLE

MAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

o on printed name of signing officer or director Schiff, Director

4/22/99

Change

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