Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90024 047 ***150.00

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**

DOCUMENT # P9600084704

1. Corporatio	n Name JYDOS CORP.	JO 47 O 1						
G.G. GC	TDUS CONF.					#1912 #1 031 #1 710 #1 111 #1 11	in (elik bibik ibil) i	
Principal Place of Business Mailing Address						#1111 #8 030 #8 004 #3 040 #0 040		19111 1161 1181
2600 MONROE STREET 2600 MONROE STREET								
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020								
US US						DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated of 10/11/1996	r Qualifed		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ар	plied For
21		26			65-0703489		No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status	Desired	\$8.75 A	dditional
27				3. Certifolis of S		Desiled	_Fee Re	quired _
City & State City & S			te			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		,
23 28			Coun	trv	8. This corporation ow			- 1000
24	25	29	30	,	Personal Property T	•		MNo
24]	9. Name and Address of Curre		1991		10. Name and Address		d Agent	1
				31 Name				
BLOOMGARDEN, PAUL M				32 Street	Address (P.O. Box Number is N	lot Acceptable)		
8551 W SUNRISE BLVD					·			<u> </u>
Suite 1 004 208 Ft Lauderdale FL 33322				33		•		
FIL	AUDENDALE FL 33322		F	34 City		F	85 Zip C	Code
44 Durquant	to the provisions of Sections 607.05	02 and 607 1508. Florida Sta	tutes the ab		corporation submits this statem	ent for the purpose of	of changing its	registered
office or r	onictored agent or both in the State	of Florida, Such change wa	s authorized	ov the corp	oration's board of directors. I he	reby accept the app	pintment as req	gistered
agent. I a	m familiar with, and accept the obligi	ations of, Section 607.0505,	rionga Statu	es.	•			
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (N	OTE: Registered A	gent signature	equired when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANG	ES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITL	E	D/P		K Change	☐ Addition
NAME .	Guydos, Gilbert G		1.2 NAN	E				
STREET ADDRESS			1.3 STR	EET ADDRESS			•	
CITY-ST-ZIP	HOLLYWOOD FL 33020		1.4 CIT	-ST-ZIP		Wildow .		
TITLE		☐ DELETE	2.1 TITL	E	D/S		Change	Addition
NAME			2.2 NAA	ΙE	GUYDOS, SUSAN S			
STREET ADDRESS			2.3 STF	EET ADDRESS	2600 Monroe St.			
CITY-ST-ZIP			2. 4 CiTY-ST-Z		HollywoodFL	33020	· * ~	
TITLE		☐ DELETE	TË 3.1 TITLE				Change	Addition
NAME			3.2 NAA	Æ				
STREET ADDRESS			3.3 STR	EET ADDRESS				
CITY-ST-ZIP				r-ST-ZIP				CT 4446-4
TITLE		☐ DELETE					Change	Addition
NAME			4. 2 NA					
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP		☐ DELETE		-ST-ZIP		<u>-</u>	☐ Change	Addition
TITLE		← ncreie	5.1 TITL 5.2 NAA				□ ouende	
NAME				EET ADORESS				
STREET ADDRESS			1	-ST-ZIP				
CITY-ST-ZIP		☐ DELETE	6.1 TITL				☐ Change	Addition
TITLE	İ		¥		1			
NAME			6.2 NAA	Œ				

CITY-ST-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 an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

1/26/99

954-922-7459