

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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000086643 (9)

1. Corporation Name
JDM SALES, INC.



Principal Place of Business

3015 RED OAK COURT
SUITE 204
PALM HARBOR FL 34684

Mailing Address

3015 RED OAK COURT
SUITE 204
PALM HARBOR FL 34684

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1996

4. FEI Number

59-3409128

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 2923 CYPRESS RIDGE DR.

Suite, Apt. #, etc.

22

City & State

23 PALM HARBOR, FL

Zip

24 34684-4911

Country

25 USA

2a. Mailing Address

26 2923 CYPRESS RIDGE DR.

Suite, Apt. #, etc.

27

City & State

28 PALM HARBOR, FL

Zip

29 34684-4911

Country

30 USA

9. Name and Address of Current Registered Agent

MARTI, DAVID W
3015 RED OAK COURT
SUITE 204
PALM HARBOR FL 34684

10. Name and Address of New Registered Agent

81 Name

MARTI, DAVID W

82 Street Address (P.O. Box Number is Not Acceptable)

2923 CYPRESS RIDGE DR.

83

84 City

PALM HARBOR

FL

85 Zip Code

34684-4911

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PT
MARTI, DAVID W
STREET ADDRESS 3015 RED OAK CT. SUITE 204
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE ☐ DELETE

NAME SV
MARTI, JUDITH P
STREET ADDRESS 3015 RED OAK CT. SUITE 204
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 2923 CYPRESS RIDGE DR.
1.4 CITY-ST-ZIP PALM HARBOR, FL 34684-4911

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 2923 CYPRESS RIDGE DR.
2.4 CITY-ST-ZIP PALM HARBOR, FL 34684-4911

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

SIGNATURE David W. Marti

4/15/98

813-789-2591

CR2E034 (10/97)