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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000101490 (6)

FILED Feb 20 1998 8:00am Secretary of State

JAYCC) MOWING INC.					
Principal Pla	ce of Business	Mailing Addr	ess			OJ ALBEN CIBIN ANNIN NUMI ANNI
1110 SOUTH WIGGINS ROAD 1110 SOUTH WIGGINS R PLANT CITY FL 33566 PLANT CITY FL 33566						
					DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified	
2 Principal I	Place of Business	2a. Mailing Ad	Idrose		12/13/1996 4. FEI Number	Applied For
21	lade of Dusiness	26	10.000		59-3422212	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt	, #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & Sta	City & State		6. Election Campaign Financing	\$5.00 May Be
23	· · · · · · · · · · · · · · · · · · ·	26			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	—	ountry	8. This corporation owes or has paid the cu	_ ' _ '
24	25 9. Name and Address of C	29	30	T	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
		origin nagistered Ager	<u></u>	81 Name	10, Name and Address of New Negistered	Agent
PARRISH, JAMES W						
1110 SOUTH WIGGINS ROAD				82 Street A	Address (P.O. Box Number is Not Acceptable)	
PL	ANT CITY FL 33566			83		
				84 City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508, FI	orida Statutes, the	above-named		f changing its registered
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 corporations board of directors. I hereby accept the appointment as registered agent. I am familiar with adultation of the corporation of t						
SIGNATURE	la su	Yames	La	me W	1. 1. 2/	16/98
SIGNATORIE	Signature, typed or ponted name of registe	red agent and use if applicable	(NO) (Registe	red Agent signature r	required when reinstaling) DATE	
12.		S AND DIRECTORS	13		ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	D DATE OF THE OWN			TITLE		☐ Change ☐ Addition
NAME	PARRISH, JAMES W	2010		NAME		}
STREET ADDRESS	1110 SOUTH WIGGINS F PLANT CITY FL 33568	TUAU	1	STREET ADDRESS		<u> </u>
CITY-ST-ZIP TITLE	POINT CITT PL 33300			CITY-ST-ZIP TITLE		Change Addition
NAME				NAME		
STREET ADDRESS				STREET ADDRESS		ľ
CITY-ST-ZIP				CITY-ST-ZIP	•	
TITLE				TITLE		☐ Change ☐ Addition
NAME			3.2	NAME		
STREET ADDRESS			3.3	STREET ADDRESS		
CITY-ST-ZIP			3.4.	CITY-ST-ZIP		
TITLE			DELETE 4.1	TITLE		☐ Change ☐ Addition
NAME			4.2	NAME		
STREET ADDRESS			4.3	STREET ADDRESS		
CITY-ST-ZIP				CiTY - ST - ZiP		
TITLE		L	20	HITE		Change Addition
NAME				NAME		
STREET ADDRESS				STREET ADDRESS		
CITY - ST - ZIP		П		CITY-ST-ZIP TITLE		Change Addition
NAME		L		NAME		Village Radition
STREET ADDRESS				STREET ADDRESS		
				CITY-ST-ZIP		
CITY-ST-ZIP	I		0.4	OTT - OT - ZIF	(- D - 1 - 140 07(0)() FI. 31 04-1 (- 14 14	22 11 111 1 2 2 2

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 employered 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.

2/16/98