FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 04 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE **CORPORATION** Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS P96000102129 (9) DOCUMENT # JESSEY CONSULTING, INC. Principal Place of Business Mailing Address 8 AVE. MONET 6 AVE. MONET PALM COAST FL 32137 PALM COAST FL 32137 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/18/1996 Mailing Address 4. FEI Number Applied For APPLIED FOR 5 Not Applicable 8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees intry 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ No 29 30 Yes Name and Address of Current Registered Agent Name and Address of New Registered FILINGS, INC. 81 3732 N.W. 16TH STREET 82 FT. LAUDERDALE FL 33311-4132 83 84 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 to plant with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) RS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS 12. **DIRECTORS IN 12** 13. DELETE Addition TITLE Change 1.1 TITLE JESSEY, FRANCIS V NAME 1.2 NAME **6 AVE. MONET** STREET ADDRESS 1.3 STREET ADDRESS PALM COAST FL 32137 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE JESSEY, PHYLLIS D 2.2 NAME 6 AVE. MONET STREET ADDRESS 2.3 STREET ADDRESS PALM COAST FL 32137 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE 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

SIGNATURE

CITY-ST-2IP

14. Thereby 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 dhanos), or on an attachment with an address.