## 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 # P97000003315 (3)

JINTEE ENTERPRISES, INC.

## FILED May 04 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			
7978 WELLSMERE CIR 7978 WELLSMERE CIR ORLANDO FL 32835 ORLANDO FL 32835				
URLANDO PL 32035		DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualified	
			01/06/1997	
2. Principal Place of Business	2a. Mailing Address	Ismae (iv.	4. FEI Number - 3419582	Applied For
21 900 5 TOY RU - Sulte, Apt. #, etc.	26 M/8 (VE)	DIMACCIO.		Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City State		6. Election Campaign Financing	\$5.00 May Be
23 CCOPE, FL	28 Or/ando	FL	Trust Fund Contribution	Added to Fees
Zip Country	Zip No.	Country	8. This corporation owes or has paid the c	
24 3476 25 US H		30 USA	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New Registere	o Agent
7978 WELLSMERE CIR ORLANDO FL 32835				
		82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)	
		83		
				los I 70 Ondo
		84 City	F	85 Zip Code
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, lyped or pented name of registered ager		Registered Agent signature requir	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
12. OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME TIERNEY, VIRGINIA B		1.2 NAME		
STREET ADDRESS 7978 WELLSMERE CIR		1.3 STREET ADDRESS		
CITY-ST-ZIP ORLANDO FL 32835		1.4 CITY-ST-ZIP		
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME	-1 .	
STREET ADDRESS		23 STREET ADDRESS		
CITY-ST-ZIP		2 4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		1
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	Losiere	4.4 CHY-ST-ZIP	,	Change L Addition
TITLE	DELETE	5.1 TITLE		Change
NAME		5.2 NAME		
STREET ADDRESS :		5.3 STREET ADDRESS		
CITY-SI-ZIP	DELETE	5.4 CITY-ST-7IP		Change Addition
TITLE	טנננונ	61 TITLE		El change El vocition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP	th this filing does not qualify fo	6.4 CITY-ST-ZIP	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

107-654-1177