## 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 # P9700008194 (7)

**JERARD PROPERTIES, INC** 

Principal Place of Business

Mailing Address

## FILED Mar 24 1998 8:00am Secretary of State



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8405 N. EDIS TAMPA FL 30				8405 N. EDISON AVENUE TAMPA FL 33604					
INMITA LE SSOUT				IRMER EL GOODE				DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
								01/22/1997	
2. Principal Place of Business 2e. Mailing Address								4. FEI Number Applied For	
21				26				59-3433826 Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				\$9.75 Additional	
22			27					5. Certificate of Status Desired Fee Required	
City & State				City & State				6. Election Campaign Financing \$5.00 May Be	
23			28	28				Trust Fund Contribution Added to Fees	
Zip .		Country		Zip	Coun	try		8. This corporation owes or has paid the current year intangible	
24	[	25	29		30			Personal Property Tax due June 30. Yes No	
	9. Name	and Address of Curre	nt Regist	ered Agent				10, Name and Address of New Registered Agent	
: MI	INIZ, TONY	.IA			8	11	Name		
8405 N. EDISON AVENUE TAMPA FL 33604							Street Address (P.O. Box Number is Not Acceptable)		
174	MICH FL 330	)U4			s	3			
					-	_			
					8	4	City	<b>■■ 85</b> Zip Code	
								FL   65   21p code	
Office or r	ne hateleinat	ont or both to the State	nt Florid	la. Such channa was	authorizad	hv.	the con	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
agent. I a	ım familiar wi	th, and accept the oblig	ations of,	Section 607.0505, F	lorida Statul	es.		portation's board of directors. Thoroby accept the appointment as registered	
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent sig						t signature	e required when reinstating) DATE		
12.	r - 3.	OFFICERS AN	D DIREC	· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD			☐ DELETE	1.1 TiTLI	:		☐ Change ☐ Addition	
NAME	MUNIZ, 1	tony Jr.			1 2 NAM	E			
STREET ADDRESS	ss 8405 N. EDISON AVENUE			1.3 \$7		ET A	DDRESS		
CITY-ST-ZIP	<b></b>			1,4		1.4 CITY - ST - ZIP			
TITLE				DELETE	2.1 TITLE	_		UP, T, S, D . Change X Addition	
NAME	Torent				2.2 NAM	F		Joseph G. Cugaino	
STREET ADDRESS	OU TOP I						DDRESS	8405 N. Edison AU	
								l ·	
CITY-ST-ZIP	<b>-</b>			DELETE	2. 4 CITY		- ZIP	Tampy F1 23604	
TITLE				FT DECEIE	3.1 TITLE			☐ Change ☐ Addition	
NAME					3.2 NAM				
STREET ADDRESS					3.3 STRE	ET A	DDRESS		
CITY-ST-ZIP					3.4. CITY		- ZIP		
TITLE				☐ DELET€	4.1 TITLE			Change Addition	
NAME					4. 2 NAM	ΙÉ			
STREET ADDRESS					4.3 STRE	ET A	DDRESS		
CITY-ST-ZIP					4.4 CITY	-ST-	ZIP	, ,	
TITLE				☐ DELETE	5.1 TITLE			Change Addition	
NAME					5.2 NAM			I = I = I	
STREET ADDRESS					5.3 STRE		nnpece :	46 2/01/	
•								! <i>!!! !!</i> !!!	
CITY-ST-ZIP		<del></del>		DELETE	5.4 CITY -		· ZIP		
TITLE				ביו הנרנונ	6.1 TITLE			<b>50000245689</b> Enange Daddition -03/24/9801088006	
NAME					6.2 NAMI			-03/24/9801088006	
STREET ADDRESS					6.3 STRE	ET A	DDRESS	***150.00	
CITY-ST-ZIP					6.4 CITY	ST-	ZIP		

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 changed, or on an altachment with an address.

CRZE034 (10/9)