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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000008925

Corporation Name

JB HOLDINGS, INC.

## Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90156 007 \*\*\*300.00



Principal Place of Business Mailing Address				T (MAICHTAL COM INTER MARCH MARCH MARCH MARCH MARCH INTER SPRING 1900) # 1111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
•	TE BLVD. NW STE 301W	<u>-</u>	1900 CORPORATE BLVD. NW STE 301W				
BOOM NATOR F	-0.30401	BOOM PINTON TE 30-30			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					01/24/1997		
2. Principal Pl	ace of Business	2a. Mailing Address	Mailing Address		4. FEI Number Applied For		
21		26			65-0735229   Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<b>⊢</b> `		5. Certificate of Status Desired Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country				8. This corporation owes the current year Intangible Personal Property Tax  Yes  No		
24	25	29 30	0		Personal Property Tax. Yes UNO  10. Name and Address of New Registered Agent		
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registered Agent		
KRASNA, GARY M							
1900 CORPORATE BLVD. NW STE 301W			82	Street A	Address (P.O. Box Number is Not Acceptable)		
	A RATON FL 33431	,					
	• .				look 75- Ook		
			84	City	FL 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 regist 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 age			nt signature re	required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	PSD OFFICERS A	ND DIRECTORS	13.	Т	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	KRASNA, JUDI		1.2 NAME	Į			
4000 CORROBATE BUILD NUM C		STE 301 W	4	LADDOESS	,		
DOCA DATON EL COACE		, 31L 301 W	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		,		
CITY-ST-ZIP	BOOK HATON 1 E 33431	☐ DELETE	2.1 TITLE	1-21-	☐ Change ☐ Addition		
NAME			2.2 NAME	Ì			
STREET ADDRESS			2.3 STREE	[ ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	2.4 CITY-S	- 1			
TITLE		☐ DELETE	3.1 TITLE	1	Change Addition		
NAME	•		3.2 NAME				
STREET ADDRESS	•		3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4, CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP	·		4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE	ļ	Change Addition		
NAME			52 NAME	į			
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP		<del></del>	5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE	Ì	☐ Change ☐ Addition		
NAME			6.2 NAME	]			
STREET ADDRESS			6.3 STREE	TADDRESS			

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 ghanged, over an attachment with an address, with all other like empowered.

SIGNATURE:

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