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Apr 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Moim Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000012981 (1)**

1. Corporation Name
J.W. 809 CORP.

Principal Place of Business
**809 OLD DIXIE HWY
RIVIERA BEACH FL 33404**

Mailing Address
**809 OLD DIXIE HWY
RIVIERA BEACH FL 33404**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1997

4. FEI Number

65-0736285

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip ry

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GHAWALI, JOUDEH J
809 OLD DIXIE HWY
RIVIERA BEACH FL 33404**

1 Name

2 Street Address (P.O. Box Number is Not Acceptable)

3

4 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, this five-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 typed or printed name of registered agent and title if applicable

(NOTE: Registered agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE

NAME **GHAWALI, JOUDEH J**
STREET ADDRESS **809 OLD DIXIE HWY**
CITY-ST-ZIP **RIVIERA BEACH FL 33404**

TITLE **V** ☒ DELETE

NAME **COTTRELL, DEBRA A**
STREET ADDRESS **809 OLD DIXIE HWY**
CITY-ST-ZIP **RIVIERA BEACH FL 33404**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exception 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 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.

SIGNATURE:

CR2E034 (10/97)