Applied For

\$8.75 Additional

Not Applicable

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 # P97000022369

JEM BUILDING CORPORATION

Principal Place of Busines
3480 FIDDLEHEAD COURT
BONITA SPRINGS FL 34134

2. Principal Place of Business

Mailing Address

3480 FIDDLEHEAD COURT **BONITA SPRINGS FL 34134**

2a. Mailing Address

Suite Ant # etc.

26

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90096 034 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

03/12/1997

59-3434094

4. FEI Number

City & State	Suite, Apt. #	, etc.	H-1	<u></u>					5. Certificate of Status Desired					ired
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Zip Country Zip Country Zip Country Zip Sign Zip S	–		⊢ ′									_	led to	Fees
9. Name and Address of Current Ragistered Agent 9. Name and Address of Current Ragistered Agent 9. Name and Address of New Registered Agent 81 Name MORRILL, STEPHEN W 3480 FIDDLEHEAD COURT BONITA SPRINGS FL 34134 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes. It is not address of the purpose of changing its registered agent. I am familiar with, and accept the obligations of Sections 607.0505. Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. Pursuant to the provisions of Sections 607.0505. Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. TITLE 12. DO DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY ST-ZIP 14. CITY ST-ZIP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. LE STREET ADDRESS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ASSERTANCESS 19. AND THE CONTROL ASSERTANCESS 29. AND TH						ntry					ent year Inta	ngible	г	INO I
Name and Address of Current Registered Agent St. Name Name Name	24	25 29 30					Personal Property Tax.							
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BONITA SPRINGS FL 34134 83	MORI	RILL, STEPHEN W				82	Street Addr	ress (P.O. Box	x Number is N	lot Accepta	able)			
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 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 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 office or registered directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change by the corporation's board of directors. I hereby accept the appointment as registered office or registered of the corporation's board of directors. I hereby accept the appointment as registered or proportion agent, and accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered or proportion agent, and accept the appointment as registered or proportion agent, and accept the appointment as registered or proportion and accept the objection of the proportion and accept the appointment as registered or proportion and accept the appointment as registered or proportion and accept the appointment as registered or proportion agent, and accept the appointment as registered or proportion and accept the appointment as registered or proportion. 12.						02	• • •							
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office or registered agent, or both, in the scale of Profiles of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and the if applicable. Signature, typed or printed name of registered agent and the if applicable. (NOTE, Registered Agent dignature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DMORRILL, STEPHEN W 3480 FIDDLEHEAD COURT STREET ADDRESS CITY-ST-ZIP BONTA SPRINGS FL 34134 DELETE 22 INTILE NAME 22 STREET ADDRESS CITY-ST-ZIP TITLE NAME 32 STREET ADDRESS CITY-ST-ZIP TITLE NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE NAME 42 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE NAME 42 NAME 43 STREET ADDRESS CITY-ST-ZIP TITLE NAME 43 STREET ADDRESS CITY-ST-ZIP TITLE NAME 44 STREET ADDRESS CITY-ST-ZIP TITLE NAME 45 STREET ADDRESS CITY-ST-ZIP TITLE NAME 53 STREET ADDRESS CITY-ST-ZIP TITLE NAME 54 STREET ADDRESS CITY-ST-ZIP TITLE NAME 55 STREET ADDRESS CITY-ST-ZIP TITLE NAME Change Additional Control Control Change Additional Cont				· · · · · · · · · · · · · · · · · · ·				aration cubm	ite this statem	ent for the	nurnose of	Ll_ changin	g its re	egistered
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CITY-ST-ZIP 14. I bereby 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 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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.	CITY-ST-ZIP	I will be to the state of the s	h this filing d	ope not qualify	for the ex	emn	tion stated in	Section 119.	07(3)(i), Florid	la Statutes	. I further ce	rtify tha	t the ir	nformation

I nerepy certify that the information supplied with this lifting does not qualify for the exemption stated in the same legal effect as if made under oath; that I am at 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 at ordicer 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 attachment with an address, with all other like empowered.

SIGNATURE: