

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 01, 1999 8:00 am
Secretary of State

09-01-1999 90009 050 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000023967

1. Corporation Name

JUNGLE CUTS, INC.

Principal Place of Business

**2108 S PARK AVENUE
SANFORD FL 32771**

Mailing Address

**2108 S PARK AVENUE
SANFORD FL 32771**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/10/1997

4. FEI Number

59-3431286

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 the current year
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

21 4660 E. COLONIAL DR.

2a. Mailing Address

26 4660 E. COLONIAL DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 ORLANDO, FL

City & State

28 ORLANDO, FL

Zip

Country

24 32803

25 USA

Zip

Country

29 32803

30 USA

9. Name and Address of Current Registered Agent

**PRIETO, SHARYN
2108 S PARK AVENUE
SANFORD FL 32771**

10. Name and Address of New Registered Agent

81 Name

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

83

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 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 607.0605, 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

TITLE **D** ☐ DELETE

NAME **PRIETO, SHARYN**
STREET ADDRESS **720 MOCKINGBIRD LANE**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **D** ☐ DELETE

NAME **PRIETO, TONY O**
STREET ADDRESS **2108 S PARK AVENUE**
CITY-ST-ZIP **SANFORD FL 32771**

TITLE **D** ☐ DELETE

NAME **PRIETO, VALERIE O**
STREET ADDRESS **2108 S PARK AVENUE**
CITY-ST-ZIP **SANFORD FL 32771**

TITLE **D** ☐ DELETE

NAME **LAWSON, KIM E**
STREET ADDRESS **1316 AUGUSTA NATIONAL BLVD**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

8/10/99

PA7600023967
611648-90009-50

To Whom It May Concern,

This is the second time I am writing to notify you of our change of address, as noted on the attached form. I first wrote to you in December 1998 to inform you of our address change. Because it was sent to the previous address, I did not receive the FIRST corporation Annual Report. I am enclosing the original \$150. - fee, and hope the new address will be noted for next year's report, so that I may submit with the FIRST notice.

Thank you for your help,

Sharon L. Prieto

SHARON PRIETO
PRESIDENT, JUNOLE CUTS

(407) 895-4455