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

FILED Mar 20 1998 8:00am Secretary of State

DOCU 1. Corporation JAY PA	MENT on Name A TEL, INC		00277	(4)									
Principal Plac	on Nucinas		Mailion	Address					i Lealisaan saa denis deess eessu aasud eensu eessa did			I HOM INDI	
Principal Place of Business Mailing Address 502 CENTURY AVENUE 502 CENTURY AVENUE													
FRUITLAND PARK FL 34731 FRUITLAND PARK FL 34731													
									DO NOT WRITE IN THIS	SPACE			_
									3. Date Incorporated or Qualified 03/26/1997		_	-	
2. Principal F	Place of Busin	ness	├ ─~	2a. Mailing Address					EO 2422726			lied For]
21 Cuita Ant	4		26	Suite, Apt. #, etc.					59+3432/30	- 00:	_	Applicable	4
Suite, Apt.	H, BIC.			27					5. Certificate of Status Desired			dditional Juired	
City & Sta	te			City & State					6. Election Campaign Financing			Иау Ве	1
23			28	28					Trust Fund Contribution			Fees	
Zip		Country	Zip		Con	ntry			8. This corporation owes or has paid the cu		r Inta	ngible	7
24	25			29 30						Yes		No	4
		and Address of Curi	ent Hegistered	Agent		81	Name		10. Name and Address of New Registered	Agent			4
	TEL, JITENI 2 CENTURI				į					<u> </u>			╛
		ARK FL 34731					Street A	ddres	ss (P.O. Box Number is Not Acceptable)				l
· · ·	OUDSID IT	ANK IL OTISI			1	83							1
					١, ١	84			<u>.</u>				1
							City		FL	85	Zip C	ode	
11. Pursuant office or	to the provis registered ac	ions of Sections 607.0 jent, or both, in the Sta th, and accept the ob	502 and 607,150 ate of Florida, Suc	8, Ftorida Statut ch change was	es, the ab	ove by	named c	orpo	ration submits this statement for the purpose on's board of directors. I hereby accept the app	changi ointmer	ng its t as r	registered egistered	1
SIGNATURE	in (annina) w	in, and accept the op	igations of, Secti	on 607.0303, Fi	onua sian	uies.							
SIGNATURE	Signature, typicol	or printed name of registered			E: Registered	l Agen	nt signature re	equired	when reinstating) DATE				١
12.	OFFICERS AND DIRECTORS DELETE					13.			ADDITIONS/CHANGES TO OFFICERS AND	DIREC Chai		IN 12 Addition	18
TITLE										L Cital	ığıc	Augition	1
NAME STREET ADDRESS									ATEL, JAY				18
CITY-ST-ZIP				1.4 Cit			02 CENTURY AVE RUITLAND PARK, FL 34731				18		
TITLE	DELETE			DELETE	2.1 TIT		-	_ [[CULICANU PARK, FL 34731	☐ Char	nge	Addition	٦٢
NAME				2.2 M			2.2 NAME						
STREET ADDRESS	Ì			23			2.3 STREET ADDRESS						i
CITY-ST-ZIP							r-ziP						_
TITLE				☐ DELET E	3.1 TIT		ļ —			☐ Char	ge	Addition	
NAME					3.2 NA		- 1						
STREET ADDRESS							ADDRESS		•				1
CITY+ST-ZIP				DELETE	3.4. CI		T- ZIP			Char		Addition	\dashv
TITLE	ļ			☐ DELETE	4.1 TiTi		- [Char	Ν̈́C	L Addition	-
NAME CIDEET ADDRESS					4, 2 NA		address						
STREET ADDRESS CITY-ST-ZIP					4.3 ST								
TITLE				DELETE	5.1 T(T					Char	ge	Addition	1
NAME					5.2 NA					_		-	
STREET ADDRESS				5.3 S			STREET ADDRESS						1
CITY-ST-ZIP					5.4 CIT								
TITLE				DELETE	6.1 TIT					Char	ge	Addition	7
NAME					6.2 NA	ME							
STREET ADDRESS					6.3 STF	REET A	DDRESS						
CITY-ST-ZIP					6.4 CIT			·····				* ***	1
54. I harahy d	certify that the	e information supplied	with this filing do	es not qualify fo	or the exer	motic	on stated	in Se	action 119.07(3)(i). Florida Statutes, I further ce	rtify that	the ir	normation	1

reflect countries and an information supplied with the information stated in Section 119.07(3)(i). Frortal Statutes. I further certify that the information indicated on this annual report or supplemental and real 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 of true see 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 allachment with an address.

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