PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre:ary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000052618

1. Corporation Name

CITY-ST-ZIP

JFL3 INCORPORATED

Apr 26, 1999 8:00 am Secretary of State 04-26-1999 90230 042 ***150.00

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Principal Flace of Business Mailing Address						1						
1116 14TH ST SUITE A	-	PO BOX 313 BRADENTON BCH FL 34:	PO BOX 313 BRADENTON BCH FL 34:217				DO NOT WE	TE IN TI	HS SPA	CE		
BRADENTON FL	. 34205						DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed					
						06/13						
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			Aı	polied For		
21		26				65-0776861			\vdash	o Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							\$8	3.75	A dditional	
22	•	27				5. Centica	te of Status Desired			Fee R	e quired	
City & State	e	City & State				6. Election	Campaign Financing			5.00	May Be	
23		28	28			Trust Fund Contribution Added to Fees					to Fees	
Zip	Country	Zip	Cou	ntry		8. This con	poration owes the curr	ent year	intangib	le		
24		29	30				al Property Tax.		Y		No	
	9. Name and Address of Currer	t Registered Agent				10. Name a	and Address of New	Register	d Agen	<u>t</u>		
P4-1 P				81	Name							
	DMAN, MARC H			82	Street Arldr	ress (P.O. Box	Number is Not Accept	able)				
	26TH STREET WEST					<u> </u>	<u> </u>					
BHAI	DENTON FL 34205-3510			83	!							
				84	City				. 85	Zip	Code	
	to the provisions of Sections 607.050			\ \) ·			F	<u>L </u>			
agent. I ai	m familiar with, and a cept the obligation of registered age.	<u> </u>				ed when reinstating)		DATE				
12.		II) DIRECTORS	13.				NS/CHANGES TO OF	FICERS	AND DE	RECTO	ORS IN 12	
TITLE	P	☐ DELETE	1.1 TD	ILE						Change	Addition	
NAME	LOVETT, BRENDA S		1.2 NA	ME								
STREET ADDRESS	210 54TH ST/WEST APT		1.3 ST	REET	ADDRESS							
CITY-ST-ZIP	HOLMES BCH FL 34217		14 CF	TY-S1	T-ZIP			_		_		
TITLE		☐ DELETE	2.1 TR					-		Change	Addition	
NAME			2.2 NA	ME								
STREET ADDRESS			2.3 ST	REET	ADDRESS							
C!TY-ST-ZIP			2. 4 C	TY-S	ST-ZIP					_		
TITLE		☐ DELETE	3 1 TIT							Change	☐ Addition	
NAME			3.2 NA	ME								
STREET ADDRESS			3.3 ST	REET	TADDRESS							
CITY-ST-ZIP			3.4. C	TY-\$	IT-ZIP							
TITLE		☐ DELETE	4,1 TIT	rLE						Change	Addition	
NAME			4 2 N	AME								
STREET ADDRESS			4.3 ST	REET	TADDRESS							
CITY-ST-ZIP			4. <u>4</u> Cl	TY-SI	T-ZIP							
TITLE		☐ DELETE	5.1 TIT	ηE						Change	☐ Addition	
NAME			5 2 NA	ME								
STREET ADDRESS			5.3 ST	REET	TADDRESS							
CITY-ST-ZIP			5.4 CI	TY-S1	T-ZIP							
TITLE		☐ DELETE	6.1 TI	TLE				_		Change	Addition	
NAME			6.2 NA	ME								
STREET ADDRE 3S			6.3 ST	REET	T ADDRESS							

14. 1 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 recuired 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.

6.4 CITY-ST-ZIP

SIGNATURE: