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

DOCUMENT # P97000059626 (6)

JEDAY UNLIMITED INCORPORATED

Principal Place of Business

Mailing Address

FILED May 08 1998 8:00am Secretary of State



1810 FLAMINGO DR ORLANDO FL 32803		P O BOX 1016 WINTER PARK FL 32790-1016		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 07/07/1997	-	
<u> </u>	lace of Business	2a. Mailing Address	T		4. FEi Number	A	oplied For
21 6 OC	<u> </u>	+	Even	green	59-3455728	N	ot Applicable
Suite, Apt		Suite. Apt. #, etc.			5. Certificate of Status Desired		Additional equired
	rwood, FL	28 Long wood	, Fi		Election Campaign Financing Trust Fund Contribution		May Be to Fees
zip 24 32 り!	Country 25 USA	29 32750	Count	SA	 This corporation owes or has paid the c Personal Property Tax due June 30. 		langible No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	d Agent	
SAFIAN, SHELLEY C				1 Namo			
1610 FLAMINGO DR			82 Street Addr		ress (P.O. Box Number is Not Acceptable)		
ORI							
	•		8	3			
			84	4 City	E	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 of the purpose of change was authorized by the corporation's board of directors.							
SIGNATURE							
12.	Signature, typed or printed name of registered agent OFFICERS AND			gont signature requir	red when reinslating) DATE	ID DIDECTOR	2.11.12
TITLE	0	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTOR Change	RS IN 12 Addition
NAME	SAFIAN, SHELLEY C		1.2 NAME	:		Change	MOUNTON
STREET ADDRESS	1610 FLAMINGO DR			T ADDRESS]
CITY-ST-ZIP	ORLANDO FL 32803		1.4 CITY-				İ
TITLE	D	DELETE	2.1 TITLE	31-2IF		☐ Change	Addition
NAME	SPEER, HARRY A		2.2 NAME			Onlingo	
STREET ADDRESS	146 W SYBELIA AVE			T ADDRESS			
CITY-ST-ZIP	MARTIAND EL ACTE		2 4 City				
TITLE	D	DELETE	3 1 TITLE	, <u></u>		Change	Addition
NAME	BARNES, DONALD E		3.2 NAME				_
STREET ADDRESS	1044 CASTELLO DR SUITE 211		3.3 STREE	T ADDRESS			
CITY-ST-ZIP	NAPLES FL 34103		3.4. CITY -	· S1 - ZIP			
TITLE		☐ DELETE	4.1 THTLE			Change	Addition
NAME			4. 2 NAME	:			
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY -	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME	İ			•
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP	·		5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE]		Change	☐ Addition
NAME			6.2 NAME	1			
STREET ADDRESS			63 STREE	I ADDRESS			
CITY-ST-ZIP			6.4 CITY-	SI-ZIP			
14. I hereby certify that the information supplied with this filling 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 eath; 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 13 if changed by on an attachment with an address Shelley C. Sc.Rich, President							