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

P97000059774 (4) DOCUMENT #
1. Corporation Name

JAS BUILDING CARE SERVICES, INC.

Principal Place of Business

Mailing Address

FILED May 14 1998 8:00am Secretary of State



S617D LYNN LAKE DRIVE SOUTH ST. PETERSBURG FL 33733		5817D LYNN LAKE DRIVE SOUTH ST. PETERSBURG FL 33733			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/07/1997		
2. Principal Pla	ace of Business	2a, Mailing Address			4. FEI Number	Ar	pplied For
21		26 P.O. Box 12746		59-3465298		ot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required		
22		27					·
City & State		City & State		FL	6. Election Campaign Financing		May Be
23		28 St. Petersbu	Countr		Trust Fund Contribution		to Fees
Zip	Country	^{7/p} 33733	L 4.	ŠA	 This corporation owes or has paid the Personal Property Tax due June 30. 		tangible No
24	25 9. Name and Address of Current		30 U	<u>UN</u>	10. Name and Address of New Regist		2 140
1104		nogiototo rigorii	81	Name			
	HRY, JANET F						
5817D LYNN LAKE DRIVE SOUTH ST. PETERSBURG FL 33733			82 Str		Address (P.O. Box Number is Not Acceptable)		
51.	PEIENSBURG PL 33/33		83	3			
			84	City		FL 85 Zip	Code
at a Dissertant to	o the provisions of Soctions 607 0502	and 607 1508 Florida Statute	e the abov	Je-named co	propration submits this statement for the purp	,	ts registered
office or re	ogistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such cha nce w as a	authorized b	ov the corpor	ration's board of directors. I hereby accept the	e appointment as	registered
SIGNATURE	Signature, typed or proited name of registered agost	and the if applicable (NOTE	Registered A	gent signature rec	1 · · · · · · · · · · · · · · · · · · ·	DATE	- <u></u>
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	☐ DELETE	1.1 TITLE	1	President	☐ Change	Addition
NAME	HENRY, JAMES		1.2 NAME				
STREET ADDRESS	5817D LYNN LAKE DRIVE SOL	лн	1.3 STREET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33733		1.4 CITY-ST-ZIP				
TITLE	DELETE		2.1 TITLE			L Change	Addition
NAME	HENRY, JANET F		2.2 NAME				
STREET ADDRESS	5817D LYNN LAKE DRIVE SOL	ЛН	2.3 STREET ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33733	The state	2. 4 CITY-ST-ZIP			Chapea	Addition
TITLE	☐ DELETE		3.1 T(TL€			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	The state of the s		3.4. CITY - \$1 - ZIP			Chenn	Addition
TITLE	DELETE		4.1 TITLE			Change	
NAME			4. 2 NAM				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY			Change	☐ Addition
TITLE		DELETE	5.1 TITLE			T Change	
NAME			5 2 NAME				
STREET ADDRESS				et address			
CITY-SY-ZIP		Decem	5.4 CITY-			Change	Addition
TITLE		L DELETE	61 TITLE			L.J Change	FT MORRION
NAME			6 2 NAME	<u> </u>			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		t the Oles deer and more	64 CITY-	SI-ZIP	in Section 119.07(3)(i), Florida Statutes furt	har partify that the	a information
indicated of officer or o	on this annuat report or supplemental	annual report is true and acc iver or trustee empowered to	urate and t	hat my signa	In Section 1907(3)(), Fiolida Statutes 1 in a slure shall have the same legal effect as if ma equired by Chapter 607, Florida Statutes; and	ade under oath; th	natiam an