FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

P**RO**FIT CORP**O**RATION ANNUA**L** REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED Jun 18 1998 8:00am Secretary of State

DOCUMENT # P9700059936 (9) 1. Corporation Name J'BIRDS PLACE, INC. Principal Place of Business 909 BREAKERS AVENUE FORT LAUDERDALE FL 33304 PORT LAUDERDALE FL 33304 PORT LAUDERDALE FL 33304 PORT LAUDERDALE FL 33304						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified 07/09/1997				
─ '	Place of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number	Applied For			
21		26				(65-6771077 Not Applicable				
Suite, Apt		27]				5. Certificate of Status Desired S8.75 Additional Fee Required				
City & Sta	to	City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Co	ountry	/	8. This corporation owes or has paid the our	rrent ye	ear Inf	tangible	
24	25	29	30	····,			Yes		No	
,	9, Name and Address of Curr	ent Registered Agent		81	Name	10. Name and Address of New Registered	Agent			
PUG U O, JEANETTE 909 B REAKERS AVENUE FORT LAUDERDALE FL 33304				82						
				84	City		85	Zip	Code	
				L.	′	<u>FL</u>	- l l	<u> </u>		
11. Pursuant office or agent 1: SIGNATURE	to the provisions of Sections 607 05 registered agent, or both, in the Sta am familiar with, and accept the obt	502 and 607,1508, Flor to of Florida. Such cha gations of, Section 607	ida Statutes, the nge was authoriz 7.0505, Florida St	abovi ed by atule:	e-named corp y the corporal s.	poration submits this statement for the purpose o tion's board of directors. I hereby accept the app	f chang pointme	ging it ent as	is registered registered	
	Signature typed or printed earns of requestion of a	and the second second second			nt signature requi	red when reinstating) DATE				
12,		ND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND				
TITLE	HKESIDERI	الله ا		TITLE			LJ G	hange	Addition	
NAME	PRESIDENT JEANETTE PULL GOO BREAKERS	5410 Aug		NAM≿						
STREET ADDRESS	THE STATE OF THE S	7 2225			ADDRESS					
CITY-ST-7IP	FT. LAUDER DALE, S	16 3330		CITY-S	51 - ZIP		110	hanna	Addition	
TITLE		LJ l		TITLE	-		ᆈᅜ	hange	L_J Mauriton	
NAME OTRECT ADDRESS				NAME CTOCET	1000ccc					
STREET ADDRESS	1		b		ADDRESS					
CITY-ST-ZIP		7		CITY - ! TILE	SI-ZIP		Tie	hange	Addition	
NAME		L.) I		NAME			ان ب	en Ae	Lui Addition	
NAME	1		4 32	NAME						

CITY-ST-ZIP 3 4. CITY - ST - ZIP DETETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - 7IP CITY-ST-ZIP DECETE Change Addition TITLE 5.1 TIFLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY- \$1-7IP CITY-ST-ZIP DELETE Change 6.1 TITLE TITLE 6.2 NAME NAME -06/13/98--01114--050 ***150,00 6.3 STREET ADDRESS STREET ADDRESS

3.3 STHEET ADDRESS

64CITY-ST-ZIP

14. Thereby 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 suppliemental annual report is true and accurate and that my signature shall have the same legal offect as if made under oath; that I am an officer or director of the corporation of the receiver or fursited 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 OF THE PICK

STREET ADDRESS

Tecrotto Pust

5-18.98

954-

5-18-98



. To whom it may concern,

Tom requesting that the enclosed fee for \$150.00 will be accepted and the late fee waired. The reason I amine requesting this consideration, is that my accountant did not get this in formation to be until last friday, May 15th and I was unaware of the due date and late fee because this is my first corporation. All future biling will be done on time.

Respectfully,

Jeanette Puglie