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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P97000060474**1. Corporation Name

Country

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

Zip

JBDJ, INC.

Principal Place of Business	Mailing Address
1408 N. WESTSHORE BLVD., STE, 800	1408 N. WESTSHORE BLVD., STE. 800
TAMPA FL 33609	TAMPA FL 33609

26

27

28

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90179 026 ***150.00



Applied For

\$8.75 Additional

\$5.00 May Be

Added to Fees

Fee Required --

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

Trust Fund Contribution

07/11/1997 4. FEI Number

59-3458648

4	25	29	30			Personal Property Tax.		Yes	□No
	9. Name and Address of	Current Registered Agent				10. Name and Address of New F	Registered A	gent	
				81 Na	me				
	ARY, D. MICHAEL	•••		82 Str	eet Addre	ss (P.O. Box Number is Not Accepta	able)		
	e. Kennedy Blvd., Ste	. 2700		-	001710010				
TAM	PA FL 33602			83		•			
				84 Cit				85 Zip	Code
				34 Cit	у		FL	03 27	0000
11. Pursuant	to the provisions of Sections	607.0502 and 607.1508, Florida	Statutes, the a	bove-nar	ned corpo	ration submits this statement for the	purpose of c	hanging its	registered
office or re	egistered agent, or both, in the	e State of Florida. Such change e obligations of, Section 607.05	e was authorize 505 Elorida Stat	d by the c tutes.	orporation	n's board of directors. I hereby accep	ot the appoint	ment as re	egistered
-	ir laminar war, and cooopi a	o obligations of addition out to							
SIGNATURE	Signature, typed or printed name of regi	stered agent and title if applicable	(NOTÉ: Registered	d Agent signa	ture required	when reinstating)	DATE		
12.	OFFIC	ERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OF			
TITLE	D	☐ D£L	.ETE 1.1 T	TLE				☐ Change	Addition
NAME	TITUS, DANIEL L		1.2 N	AME					
STREET ADDRESS	1408 N. WESTSHORE E	BLVD., STE. 800	1.3 S	TREET ADDR	ESS				
CITY-ST-ZIP	TAMPA FL 33609		1.4 C	ITY-ST-ZIP					
TITLE	D	☐ DEL	ETE 2.1 T	ITLE		•		Change	☐ Addition
NAME	TITUS, BRUCE E	*.*	2.2 N	IAME					
STREET ADDRESS	1408 N. WESTSHORE E	BLVD., STE. 800	2.3 \$	TREET ADDR	ESS				
CITY-ST-ZIP	TAMPA FL 33609		2.40	CITY-ST-ZIP					
TITLE	D	☐ DEL	.ETE 3.1 T	MLE				Change	Addition
NAME	vitello, Joseph Jr.		3.2 N	IAME					
STREET ADDRESS	1408 N. WESTSHORE E	BLVD., STE. 800	3.3 S	TREET ADDR	ESS				
CITY-ST-ZIP	TAMPA FL 33609		3.4. 0	CITY-ST-ZIP					
TITLE	D	XX DEI	LETE 4.1 T	ITLE				Change	☐ Addition
NAME	Dayton, Janet		4.21	NAME					
STREET ADDRESS	1408 N. WESTSHORE E	BLVD., STE. 800	4.3 S	TREET ADDR	ESS				
CITY-ST-ZIP	TAMPA FL 33609		4.4 0	ITY-ST-ZIP					
TITLE		☐ DEI	ETE 5.1 T	TLE				Change	☐ Addition
NAME			5.2 N	IAME				•	
STREET ADDRESS			5.3 S	TREET ADDR	ESS				
CITY-ST-ZIP				ITY-ST-ZIP					
TITLE		· DEL	ETE 6.1 T	ITLE				☐ Change	☐ Addition
NAME			6.2 N	IAME					
STREET ADDRESS			6.3 S	TREET ADDR	ESS				
CITY-ST-ZIP				CITY-ST-ZIP					
14. Lherehy c	ertify that the information sur	plied with this filing does not qu	ualify for the exe	emption st	ated in S	ection 119.07(3)(i), Florida Statutes. shall have the same legal effect as i	I further certi	ly that the	information

Country

officer or director of the corporation or the receiver or trusted empowered and that my signature shall have the same legal effect as it made under oath; that I am all officer or director of the corporation or the receiver or trusted empowered to secute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attach negative and address, with all other like empowered.

SIGNATURE:

OFFICER OR DIRECTOR