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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthym 🕟

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000068459 (1)

J.P. MANGAGEMENT SERVICES, INC.

**FILED** May 11 1998 8:00am Secretary of State



Principal Place of Business  THE DAKOTA HOTEL  606 POST STREET  SAN FRANCISCO CA 94109			THE DAK	Mailing Address THE DAKOTA HOTEL 806 POST STREET SAN FRANCISCO CA 94109				DO NOT WRITE IN THIS SPAČE
ONN FRANCIS	ONN I III	THE PROPERTY OF THE PROPERTY O				3. Date Incorporated or Qualified 08/07/1997		
2. Principal Pla	oe of Busin	oss	2a. Mailing	2a. Mailing Address				4. FEI Number Applied For
21 68 3			26					59-3473563 Not Applicable
Suite, Apt. #, etc.			27	·····				5. Certificate of Status Desired S8.75 Additional Fee Required
Oity & State			h	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country				Zip Country				This corporation owes or has paid the current year Intangible
24			· )	29 30		,		Personal Property Tax due June 30. 🔲 Yes 🔲 No
9. Name		and Address of Curre		gent				10. Name and Address of New Registered Agent
HO	DD, JOHN	M			8	31	Name	
., -		ND STREET				32	Street A	ddress (P.O. Box Number is Not Acceptable)
PLANTATION FL 33329						33		
						34	City	FL 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. Thereby accept the appointment as registered agent. Familiar with, and accept the obligation 607.0505, Florida Statutes.								
SIGNATURE	Signatur typed	or printed name of registered ag	ent and title if applicat	ne (NOI	IE Registered a	Ager	nt signature fe	equired when reinstating) DATE
12. /	<del>/***</del>		D DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	<b>3</b>			DELETE	1.1 TITL	.F		☐ Change ☐ Addition
NAME	STREET ADDRESS 11301 N.W. 22 STREET					1.2 NAME 1.3 STREET ADDRESS		
STREET ADDRESS								
CITY-ST-ZIP	PLANIA	TION FL 33329		T COLLEGE	140(1)		T - <b>Z</b> IP	Change Addition
TITLE	DICTOO.	DALII		DELETE	2.1 TiTU		1	C Change C Notition
NAME	PIETRO,	NTANZAS DRIVE			2.2 NAN		ADDOLOG	
STREET ADDRESS		3 FL 33872				3 STREET ADDRESS 4 City-St-Zip		
CITY-ST-ZIP TITLE	D	7 ( 2 000 ) 2		DELETE	3.1 TITU	_	1-24	Change Addition
NAME	PIETRO, JOANNA L THE DEKOTA HOTEL, 606 POST			<del></del>		3.2 NAME		,
STREET ADDRESS			OST STREET	DEGROTE		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
CITY-ST-ZiP								
TITLE				DELETE 4.110				☐ Change ☐ Addition
NAME	NAME				4. 2 NA		- 1	
STREET ADDRESS	STREET ADDRESS				4.3 STREE1 AD		ADDRESS	
CITY-ST-ZIP				4.4 C(T)			T - ZIP	
TITLE				DELETE 5.1 T				☐ Change ☐ Addition
NAME					5.2 NAM			
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP				DELETE	5.4 CiTY		T-ZIP	Change Addition
TITLE				TT DELETE		61 TITLE		C Outside C Volumen
NAME					6 2 NAM		LODDE OO	
STREET ADDRESS	•						ADDRESS	
CITY-ST-ZIP	ertify that th	e information supplied v	with this filme do	es not qualify f	6.4 City for the exer			in Section 119.07(3)(i), Florida Statutes. I further certify that the information

Indicated on this annual report or supplied with this ming doos not quality for the exemption stated in Section 1.19.07(3)(), Florida Statutes. Thinfer 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 oakly that I am an officer or director of the corporation or the receiver or trustoe-ompowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an appears.