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FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000083669 (6)

1. Corporation Name

J & J REAL ESTATE MANAGEMENT COMPANY, INC.

Principal Place of Business

1040 S. STATE RD., 7
HOLLYWOOD FL 33023

Mailing Address

1040 S. STATE RD., 7
HOLLYWOOD FL 33023

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

09/26/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 4524 GUN CLUB ROAD

26 4524 GUN CLUB ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 101

27 SUITE 101

City & State

City & State

23 WEST PALM BEACH, FL.

28 WEST PALM BEACH, FL.

Zip

Country

Zip

Country

24 33415

25 USA

29 33415

30 USA

9. Name and Address of Current Registered Agent

THOMPSON, DOUGLAS E
4524 GUN CLUB RD., STE. 101
W. PALM BEACH FL 33415

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DOUGLAS E. THOMPSON

(NOTE: Registered Agent signature required when reinstating)

01/28/98

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DP
STALUPPI, JOHN
1040 S. STATE RD., 7
HOLLYWOOD FL 33023

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

S
STALUPPI, JEANETTE
1040 S. STATE RD., 7
HOLLYWOOD FL 33023

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

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STREET ADDRESS

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TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

4524 GUN CLUB RD STE 101
WEST PALM BEACH, FL. 33415

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

4524 GUN CLUB RD STE 101
WEST PALM BEACH, FL. 33415

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing 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 oath; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JOHN STALUPPI
PRESIDENT

01/28/98 (561) 689-0552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0136374

CR2E034 (10/97)