PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000087139

1. Corporation Name

IODOE MICHELS INC

JUNGE IVIIGUELS, INC.		
Principal Place of Business	Mailing Address	
8740 SEMINOLE BOULEVARD SEMINOLE FL 33772	8740 SEMINOLE BOULEVARD SEMINOLE FL 33772	
2. Principal Place of Business	2a. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90090 041 ***150.00



8740 SEMINOLE BOULEVARD SEMINOLE FL 33772 8740 SEMINOLE BOULEVARD SEMINOLE FL 33772)		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
					10/01/1997
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-3472363 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•		5. Certificate of Status Desired \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	у	This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax. ☐ Yes ☑No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent
			81	Name	
	NER, JULIE R		82	Street	Address (P.O. Box Number is Not Acceptable)
221	PAULS DRIVE]"	30000	Address (1.0. box (damber is flot (weeplasts))
SUIT	E D		83	3	
BRAI	NDON FL 33511				log 7 Out
			84	4 City	FI 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the abov	ve-named	corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was aut	thorized by	y tne corp	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE					required when reinstating) DATE
	Signature, typed or printed name of registered age	nt and title if applicable (NOTE: F ND DIRECTORS		ent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	P OFFICERS AI	DELETE	13.		Abbition Addition
TITLE	•	G beech	1.2 NAME		,
NAME	HUMMER, GEORGE B		1	ET ADDRESS	ASTRA SOME ALLER
STREET ADDRESS	10830 VALENCIA TERRACE				Hummer, George B 8740 Seminole Blvd. (Same as above Seminole, FL 33772 mailing address)
CITY-ST-ZIP	SEMINOLE FL 33772	DELETE	1.4 CITY-	SI-ZIP	Change Addition
TITLE		DELETE	2.1 TITLE		, and a contract of the contra
NAME			2.2 NAME		
STREET ADDRESS			2.3 STRE	ET ADDRESS	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS					I .
CITY-ST-ZIP			3.3 STRE	ET ADDRESS	
			3.3 STRE		
TITLE		☐ DELETE		-ST-ZIP	☐ Change ☐ Addition
TITLE NAME		☐ DELETE	3.4. CITY-	-ST-ZIP	☐ Change ☐ Addition
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CITY-ST-ZIP 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, with all other like empowered.

6.4 CITY-ST-ZIP