

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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90087 032 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000021810

1. Corporation Name

THE JOMAR GROUP, INC.

5 536465 - 90087 - 32

Principal Place of Business Mailing Address
3225 Latana Drive 3225 Latana Drive
Palm Harbor, Florida 34684 SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3/98

2. Principal Place of Business

21 3225 Latana Drive

Suite, Apt. #, etc.

22

City & State

23 Palm Harbor, FL

Zip Country

24 34684

25 USA

2a. Mailing Address

26 3225 Latana Drive

Suite, Apt. #, etc.

27

City & State

28 Palm Harbor, FL

Zip Country

29 34684

30 USA

4. FEI Number

59-3499434

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

STEVEN MARCIANO
3225 LATANA DRIVE
PALM HARBOR, FL 34684

10. Name and Address of New Registered Agent

81 Name

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

3225 LATANA DRIVE

83

PALM HARBOR FL 34684

84 City

FL

85 Zip Code

34684

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PRESIDENT

STREET ADDRESS STEVEN MARCIANO

CITY-ST-ZIP 3225 LATANA DRIVE

PALM HARBOR, FL 34684

TITLE ☒ DELETE

NAME VICE PRESIDENT

STREET ADDRESS MELISA JONES

CITY-ST-ZIP 4415 W IDLEWILD AVE

TAMPA, FL 33614

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME VICE PRESIDENT

1.3 STREET ADDRESS LINDA L. MARCIANO

1.4 CITY-ST-ZIP 3225 LATANA DRIVE

PALM HARBOR FL 34684 ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN MARCIANO

4/29/99

Date

727/772-5686

Daytime Phone #

CR2E034 (11/98)