PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000053242 1. Corporation Name

JESTANY INVESTMENT CORPORATION

Principal Place of Busines
3405 61ST STREET EAST
DALMETTO EL 34221

Mailing Address

3405 61ST STREET EAST PALMETTO FL 34221

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

03-01-1999 90106 027 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

						06/15/1998			
2. Principal Pl	ace of Business	2a. Mailing Address			_	4. FEI Number	Ap	plied For	
1	26					65-0843950	No	t Applicable	
Suite, Apt.	Suite, Apt. #, etc.	pt. #, etc.			5_Certificate of Status Desired	\$8.75 <i>i</i>			
27							Fee Re	equired	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be	
3 28						Trust Fund Contribution	Added	to Fees	
Zip	Country Zip Cou			ntry		8. This corporation owes the current year Intan	gible		
4	25 29 30						Yes	X No ∤	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
5. Haine and Address of Content Hagistored Agent				81	Name				
FENIMORE, BRENDA C									
3405 61ST STREET EAST				82 Street Address (P.O. Box Number is Not Acceptable)					
PALMETTO FL 34221				83					
1712	METTO TE OTEE.			83					
				84	City	85 Zip Code			
						<u> </u>	بلنا		
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									
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 abligations of, Section 607.0505, Florida Statutes.									
99.1									
SIGNATURE Signature, typed or printed name of fegistered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	D	DELETE 1.1 T				P-T-S-M	Change	☐ Addition	
NAME	FENIMORE, BRENDA C	NIMORE, BRENDA C 12 N				•			
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CITY-ST-ZIP				Y-ST-	7IP			1	
TITLE	110000000000000000000000000000000000000	☐ DELETE 2.1 TI			- 1		Change	Addition	
		_	2.2 NA	MF	- 1'	TAWE + FEAUMORE	•		
NAME				DANIEL J. FENIMORE STREET ADDRESS CITY-ST-ZIP DALMETTO A. 34221				-	
STREET ADDRESS	~ 				ZIP DALMETTO A. 34221				
CITY-ST-ZIP				TY-ST	-ZIP	PALIMETTO PL: 3/001	Change	Addition	
TITLE	☐ DELETE 3.11				1	· ·		_	
NAME			3.2 NA		- }	,			
STREET ADDRESS	33			REETA	ADDRESS			ļ	
CITY-ST-ZIP	3.4.			TY-ST	-ZIP				
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NAME:			4. 2 N	AME	1				
STREET ADDRESS	4.3 \$			REETA	ADDRESS				
CITY-ST-ZIP				ΓΥ-ST-	ZIP	· · · · · · · · · · · · · · · · · · ·			
TITLE	DELETE 5.1 TI			LE		· — · .	Change	☐ Addition	
NAME	5.2 N		ME						
STREET ADDRESS			5 3 ST	REET /	ADDRESS				
CITY-ST-ZIP			5.4 CI	TY-ST-	ZIP				
TITLE		☐ DELETE	6.1 TIT	ΓLE	——— —		Change	☐ Addition	
			6.2 NA	ME					
NAME					ADDRESS			ł	
STREET ADDRESS			R						
CITY-ST-ZIP			6.4 Ci	IY-ST-	- 217	- Section 140 07/3/6) Floride Statutos further certifi	u that the	information	

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 informatic 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: