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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

May 07, 1999 8:00 am Secretary of State

05-07-1999 90012 004 ***150.00



DO NOT WRITE IN THIS SPACE

DOCUMENT#	P98000059924
Corporation Name	. 00000000.

HOMES BUILT BY JACK, INC.

Principal Place of Business 3800 SOUTH OCEAN DRIVE #1003 HOLLYWOOD FL 33019

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Mailing Address

3800 SOUTH OCEAN DRIVE #1003 HOLLYWOOD FL 33019

3. Date Incorporated or Qualifed 07/07/1998 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing

Added to Fees Trust Fund Contribution 28 Country 8. This corporation owes the current year Intangible Zip Country Zip ☐ Yes ΠNo Personal Property Tax. 30 29

9. Name and Address of Current Registered Agent

HANDIN, GARY I 3111 UNIVERSITY DRIVE SUITE 404 **CORAL SPRINGS FL 33065**

	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

SIGNATURE	Signature, typed or printed name of registered agent and title if app	plicable. (NOTE:	Registered Agent signature require	d when reinstating) DATE	
12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change	Addition
NAME	SCHULMAN, JACK		1.2 NAME		
STREET ADDRESS	3800 SOUTH OCEAN DRIVE #1003		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33019		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE	☐ Change	Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			~ 2. 4 CITY-ST-ZIP	<u> </u>	
TITLE		☐ DELETE	3.1 TITLE	Change	☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	☐ Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	☐ Change	☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	☐ Change	Addition Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
			6.4.0m) OT 710		

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 truetee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

SIGNATURE: