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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000073255

JUPITER MULCH, INC.

Principal Place of Business	Mailing Address
340 ROYAL PALM WAY, STE.100 PALM BEACH FL 33480	340 ROYAL PALM WAY, STE.100 PALM BEACH FL 33480
2. Principal Place of Business	2a. Mailing Address

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90088 009 \*\*\*150.00



Principal Place	e or business		Mailing Address											
340 ROYAL PALM WAY, STE.100 PALM BEACH FL 33480			340 ROYAL PALM WAY, STE.100 PALM BEACH FL 33480											
							Ĺ			DO NOT	WRITE IN	1 THI 3	SPACE	
								<ol><li>Date I</li></ol>	ncorporat	ed or Qua	ılifed			
								08/2	0/1998					
2 Principal Pla	ace of Business		2a. Mailing Address				+	4. FEI N					1	Appled For
2. Principal Flace of Business 2a. Infalling Address 26								45.	-0871	320			1	Not Applicable
<u> </u>								- 57	007	1340				Additional
Suite, Apr. #, etc. Suite, Apt. #, etc.								5. Certifo	ate of Sta	atus Desir	ed 🗌			Required
22			27											
City & State City & State										iign Finan	cing 🖂			May Be
23		28						Trust Fund Contribution Added to Fee						
Zip	Count	Country Zip Co				Country			orporation	owes the	current y	ear Int	tangibl <del>e</del>	
24	25	25 29 30							Personal Property Tax.					[]No
	9. Name and Address of Current Registered Agent							10. Name and Address of New Registered						
	y, riding diversion		3		81	Name		) Janie	1 T	Cae	0.17			
ORD	GEORGE P													
340 ROYAL PALM WAY, STE.100					82	Street	Address	dilress (P.O. Box Number is Not Acceptable)						
PALN	A BEACH FL 33480				83		01	5 Pom	nano	Dri	ve			1
						0.,							os 7ir	. Ccda
					84 City			piter				FL	85 3 <sup>Zir</sup>	458
44 Diverse 44	to the equipions of Co	tions 607 0502	and 607.1508, Florida Statu	itae the at	1000	-named	corpora	tion subm	ite this sta	tement fo	r the purp	ose of	changing i	ts re aistered
office or re	egistered agent, or bot	h, in the State of	Florida. Such change was ns of, Section 607.0505, Fl	authorized	by t	he corpo	ora ion's	s board of	d rectors.	I hereby	accept the	appoi	intment as i	registered
SIGNATURE		·										ATE		
	Signature, typed or printed nan			TE Registered	Agent	signature	requi eo wi			ANCEST			ND DIRECT	OR3 IN 12
<u> 12.                                      </u>		OFFICERS AND		13.						ANGES I	U OFFICE	- KO F	Change	
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NAME	ORD, GEORGE P			1.2 NA	ME		pan	iel.	J. C.	asey				
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				2.2 NA										
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				5.4 CI										
CITY-ST-ZIP				6.1 TIT		- LIF	<b>⊢</b>						☐ Change	e Addition
TITLE			☐ DELETE	1										
NAME				6.2 NA	ME									
STREET ADDRESS				6.3 ST	REET	ADDRESS								

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 accute 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 a light empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CR2E034 (11/98)