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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000074414

1. Corporation Name

JBZ MARKETING, INC.

Principal Place of Business

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

03-17-1999 90064 048 ***150.00



Mailing Address 2173 CHAMPIONS WAY 2173 CHAMPIONS WAY NORTH LAUDERDALE FL 33068 NORTH LAUDERDALE FL 33068 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/26/1998 2. Principal Place of Business **FEL Number** Applied For Mailing Address 5811 NW 63RPPLACE 65-0865784 5811 NN 63 PCACE Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be \Box PARKLAND Added to Fees Trust Fund Contribution 23 t ARKLAN Country Country This corporation owes the current year Intangible 33067 USA U.S.A Personal Property Tax. 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 LAND BRYAN **AMERILAWYER** Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 83 Zip Code 33067 84 ARKland 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. BRYAN SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) d agent and title if applical CR2E034 (11/98 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. PSTD Change ☐ Addition ☐ DELETE 1.1 TITLE **PSTD** TITLE ZAND, BRYAN ZAND, BRYAN 12 NAME NAME 5811 NW 63 place 1.3 STREET ADDRESS 2173 CHAMPIONS WAY STREET ADDRESS 33047 **NORTH LAUDERDALE FL 33068** PARKLAND 1.4 CITY- ST- 70 CITY-ST-ZIP ☐ Addition Change ☐ DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 4.1 TITLE TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Change Addition DELETE TITLE 51 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 11 5.4 CITY-ST-ZIP CITY-ST-ZIF Change Addition 6.1 TITLE ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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: .

CITY-ST-ZIP

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR