

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Jul 09, 1999 8:00 am
Secretary of State

07-09-1999 90006 036 ***550.00

DOCUMENT # **P98000080404**

I. Corporation Name

ABC AND J, INC.

Principal Place of Business

**3507 71ST AVENUE EAST
PALMETTO FL 34221**

Mailing Address

**8507 71ST AVENUE EAST
PALMETTO FL 34221**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/17/1998

4. FEI Number

65-0864241

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. ☐ Yes ☒ No

Principal Place of Business

5872 14TH STREET W.

Suite, Apt. #, etc.

2a. Mailing Address

5872 14TH STREET W.

Suite, Apt. #, etc.

City & State

BRADENTON, FL

Zip

34207

Country

USA

City & State

BRADENTON, FL

Zip

34207

Country

USA

9. Name and Address of Current Registered Agent

**AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

Robert D. JOHNSON

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

8507 71st AVE E

83

84 City **PALMETTO**

FL

85 Zip Code **34221**

1. 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

Robert D. Johnson
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-3-99

2. OFFICERS AND DIRECTORS

LE **PD** ☐ DELETE

ME **JOHNSON, ROBERT D**
REET ADDRESS **8507 71ST AVENUE EAST**
Y-ST-ZIP **PALMETTO FL 34221**

LE **VTD** ☒ DELETE

ME **WROBLEWSKI, ALLEN P**
REET ADDRESS **8507 71ST AVENUE EAST**
Y-ST-ZIP **PALMETTO FL 34221**

LE **SD** ☒ DELETE

ME **BOWLING, CHRISTOPHER A**
REET ADDRESS **8507 71ST AVENUE EAST**
Y-ST-ZIP **PALMETTO FL 34221**

LE **D** ☒ DELETE

ME **PRESSLEY, JAMES W**
REET ADDRESS **8507 71ST AVENUE EAST**
Y-ST-ZIP **PALMETTO FL 34221**

LE ☐ DELETE

ME

REET ADDRESS

Y-ST-ZIP

LE ☐ DELETE

ME

REET ADDRESS

Y-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition

1.2 NAME **JOHNSON, PAMELA J.**

1.3 STREET ADDRESS **8507 71st AVE E**

1.4 CITY-ST-ZIP **PALMETTO, FL 34221**

2.1 TITLE **VTD/S** ☐ Change ☒ Addition

2.2 NAME **ELIZABETH L. SHELTON**

2.3 STREET ADDRESS **5625 92ND AVE N.**

2.4 CITY-ST-ZIP **WENELAS PARK, FL 33782**

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

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.

SIGNATURE:

Robert D. Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-3-99 (941) 723-2174

CR2E034 (5/99)

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