PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000086013

Country

9. Name and Address of Current Registered Agent

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J & J COMPUTER SERVICE, INC.

		_	
Principal	Place	of	Business

Mailing Address

2648 NORTHWEST 4TH ST FT LAUDERDALE FL 33311

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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23

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Zip

2648 NORTHWEST 4TH ST FT LAUDERDALE FL 33311

2a. Mailing Address

-City & State

Zip

Suite, Apt. #, etc.

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

03-01-1999 90202 017 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/29/1998 4 FEI Number Applied For **65** OS 70166 Not Applicable \$8.75 Additional 5. Certifcate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution Country 8. This corporation owes the current year Intangible Personal Property Tax. 10. Name and Address of New Registered Agent

BERNATEK, JAMES P 2648 NORTHWEST 4TH ST FT LAUDERDALE FL 33311

82	Street Address (P.O. Box Number is Not Acceptable)					
		Ł				
83						
84	City		85	Zip Code		
		uhmits this statement for the nurrose of	chang	ing ite registere		

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 register 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.

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SIGNATURE	Signature typed or printed name of registered	agent and title if envicable (NOTE R	egistered Agent signature requ	ired when reinstating)	DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTOR	RS IN 12
TITLE	PSD	☐ DELETE	1,1 TITLE		Change	☐ Addition
NAME	BERNATEK, JAMES P		1.2 NAME			
STREET ADDRESS	2648 NORTHWEST 4TH ST		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33311		1.4 CITY-ST-ZIP			
TITLE	VTD	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	GALLAGHER, JAMES P		2.2 NAME			
STREET ADDRESS	2648 NORTHWEST 4TH ST		2.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33311		2, 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE	•	☐ Change	☐ Addition
NAME			32 NAME			ļ
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			ì
STREET ADDRESS			5.3 STREET ADDRESS			ł
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
			64 CITY-ST-ZIP			

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:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR