## 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 # **P98000086893**1. Corporation Name

JOSE PLASTER, INC.

Principal Place of Business

413 ASBURY WAY

Mailing Address

413 ASBURY WAY

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

03-01-1999 90179 011 \*\*\*150.00



BOYNTON BEACH FL 33436	BOYNTON BEACH FL 33436	BOYNION BEACH FL 33436		DO NOT WRITE IN THIS SPACE		
				3. Date incorporated or Qualifed		
				10/01/1998		
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Ap	plied For
1 Jose PLASTER	Inc 26			65-087 3358	No	t Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
413 ASBURY WAY. 27				5. Certificate of Gizida Desireo	Fee Re	equired
City & State City & State				6. Election Campaign Financing	\$5:00	*
3 Beylon Beach	V-1   28			Trust Fund Contribution	Added t	to Fees
Zip Country	Zip	_ Count	ry	8. This corporation owes the current year to		
4 33436 25 W	ext din 29 30	0		Personal Property Tax.	☐ Yes	□No
9. Name and Addres	s of Current Registered Agent	8	M No.	10. Name and Address of New Registere	a Agent	·
BONILLA, JOSE J		°	11 Name			1
413 ASBURY WAY		8	2 Street Add	Iress (P.O. Box Number is Not Acceptable)		
BOYNTON BEACH FL 33436					<u>·</u>	
BOTHTON BEACH FL 334	30	8	3			)
		8	4 City		, 85 Zip (	Code
				<b></b>		
11. Pursuant to the provisions of Section	ons 607,0502 and 607,1508, Florida Statutes,	, the abo	ve-named corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its	registered gistered
agent. I am familiar with, and accep	pt the obligations of, Section 607.0505, Florida	a Statute	es.	ion's goald of directors. Thereby accept the app	Sittle on Cab 10	gistores }
SIGNATURE						
Signature, typed or printed name of		egistered Ag	gent signature require	ed when reinstating) OATE		
12. OF	OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS		
TITLE C	DELETE	1,1 TITLE			☐ Change	☐ Addition
NAME JOJE Bon		1.2 NAMI	Ê			ļ
STREET ADDRESS 413 ABUR	y WAY:	1.3 STRE	ET ADDRESS			
CITY-ST-ZIP Bay fon	Beach FL 33434	1.4 CITY	-ST-ZIP			
TITLE VP.	☐ DELETE 2		Ē		☐ Change	☐ Addition
NAME TOSE San	tos "	2.2 NAM	E			
STREET ADDRESS 10480 Bi	Has PL cia # 737-	2.3 STRE	EET ADORESS			
CITY-ST-ZIP 2 - 4-0-0	F1 33437.	2 4 CITY	-ST-ZIP	·		
TITLE 6	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME VILLATORD	Feynaldo.	3.2 NAM	E	,		1
STREET ADDRESS 10480 BO	yton PLCIR # 737	3.3 STRE	EET ADDRESS	•		
CITY-ST-ZIP Buton	Arach.	3 4. CITY	-ST-ZIP			
TITLE	☐ DELETE	4.1 TITLE			Change	Addition
NAME	!	4. 2 NAV	IE			
STREET ADDRESS		J.	ET ADDRESS			}
CITY-ST-ZIP		4.4 CITY				
TITLE	☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME		5.2 NAM		<u>.</u>		
STREET ADDRESS		5.3 STRE	EET ADDRESS			ſ
CITY-ST-ZIP		5.4 CITY				
TITLE	☐ DELETÉ	6.1 TETLE			Change	Addition
		6.2 NAMI		ī		-
NAME		ı	EET ADDRESS			}
STREET ADDRESS		6.4 CITY			•	1
CITY-ST-ZIP	supplied with this filing does not qualify for th	1		Section 119.07(3)(i), Florida Statutes. I further of	ertify that the i	nformation
14. Thereby certify that the information	i supplied with this hing does not quality for th	IS CYCLL	אייטוי פומובט ווו	Coccor 115.07 (0)(1), 1 longa Glatules. 1 lutillet	TOTAL STREET STOP	

indicated on this annual report or supplies 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.

CR2E034 (11/98)