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FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90123 041 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P98000107425

1. Corporation Name
JASPER MARKETING, INC.



Principal Place of Business

5100 N FEDERAL HIGHWAY
SUITE 409
FORT LAUDERDALE FL 33308

Mailing Address

5100 N FEDERAL HIGHWAY
SUITE 409
FORT LAUDERDALE FL 33308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/24/1998

4. FEI Number

☒ 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 Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 1425 NE 57TH PLACE

Suite, Apt. #, etc.

22

City & State

23 FT LAUDERDALE FL

Zip

Country

24 33304

25 BROWARD

2a. Mailing Address

26 1425 NE 57TH PLACE

Suite, Apt. #, etc.

27

City & State

28 FT LAUDERDALE FL

Zip

Country

29 33304

30 BROWARD

9. Name and Address of Current Registered Agent

LEGEL, LARRY
5100 N FEDERAL HIGHWAY
SUITE 409
FORT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name

BRENDA LEGEL

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

1425 NE 57TH PL

83

FT LAUDERDALE FL

84 City

FL

85 Zip Code

33304

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.

SIGNATURE

Brenda Legel

BRENDA LEGEL

4-25-99

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LEGEL, LARRY
STREET ADDRESS 5100 N FEDERAL HIGHWAY #409
CITY-ST-ZIP FORT LAUDERDALE FL 33308
☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
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CITY-ST-ZIP
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☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
☐ Change ☐ Addition

2.1 TITLE D P
2.2 NAME RALPH COPPES
2.3 STREET ADDRESS 1004 Commerce St.
2.4 CITY-ST-ZIP Little Rock, AR. 72202
☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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:

Ralph Coppes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99

DATE

754 491 4586

DAYTIME PHONE #

CR2E034 (1/98)