SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # SOC

S00900

(8)

Malling Address

JGB ADVERTISING, INC.

Principal Place of Business

FILED
Sep 03 1998 8:00am
Secretary of State

|--|

389 NW 95TH A PLANTATION F	L 33324	389 NW 95TH AVENUE PLANTATION FL 33324			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 09/19/1990		
2. Principal P	Place of Business	2a. Maiting Address			4. FÉI Number Applied For Not Applicable		
Suite, Apt.	#, etc.	Sulte, Apt. #, etc.			\$8.75 Additional		
22		27			5. Certificate of Status Desired Fee Required		
City & Stat		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip 29	Zip Count 29 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BETH	HAVAS, JANA S.		8	Name			
389	NW 95TH AVENUE		8:	2 Street Ar	ddress (P.O. Box Number is Not Acceptable)		
PLAN	NTATION FL 33324		8:				
ĺ			*	'[_		
			84	4 City	FL 85 Zip Code		
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							
12,	Signature, typed or printed name of registered age	ND DIRECTORS	13.	Agent signature (required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELETE	1.1 TITLE		Change Addition		
NAME	BETHAVAS, JANA S.	□ pereit	1.2 NAME	[Change Addition		
STREET ADDRESS	389 NW 95TH AVENUE		1.3 STREE	TADDRESS			
CITY-ST-ZIP	PLANTATION FL		1.4 CITY-S	iT-ZIP			
TITLE	D	DELETE	2.1 TITLE		Change Addition		
NAME	PODLISH, JULIETTE		2.2 NAME				
STREET ADDRESS	389 NW 95TH AVENUE		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	PLANTATION FL		2.4 CITY-9	-T-ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition		
NAME			3.2 NAME	ì			
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			3.4 CITY-S	T-ZIP			
TITLE NAME		L DELETE	4.1 IIILE 4.2 NAME	1	Change Addition		
STREET ADDRESS			3	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-S				
TITLE		DELETE	5.1 TITLE	1-211-	Change Addition		
NAME		[] Deceie	5.2 NAME	1	Change [_] Addition		
STREET ADDRESS			1	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-S				
TITLE		DELETE	6.1 TITLE		Change Addition		
NAME			6.2 NAME		- Johnson - Johnson		
STREET ADDRESS			6.3 STREE	TADDRESS	'		
CITY-ST-ZIP			6.4 CITY-S	Į.			
44.11	are at a to the state of the state of				A COTON CLASS CONTRACTOR OF THE CONTRACTOR OF TH		

4. 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: QANAGA

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