SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/10/94: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

APPROVED AND FILED

95 MAY -1 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT

~~1994~~ 1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S77768 (7)

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-05/03/95--01105--018
*****200.00 *****200.00

1. Corporation Name
J.O. SERVICES, INC.

DO NOT WRITE IN THIS SPACE

Mailing Address	Principal Place of Business
12189 U.S. HIGHWAY 1	12189 U.S. HIGHWAY 1
SUITES 4 & 5	SUITES 4 & 5
NORTH PALM BEACH FL 33408	NORTH PALM BEACH FL 33408

If above addresses are incorrect in any way, line through incorrect information and enter correction below

3. Date Incorporated or Qualified: 09/04/1991
3a. Date of Last Report: 04/21/1993

2. Mailing Address 21
2a. Principal Place of Business 26
4. FEI Number: 65-0282281 ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc 22 / 27
5. Certificate of Status Desired: $8.75 Additional Fee Required ☐
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
City & State 23 / 28
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐
Zip 24 / Country 25 / Zip 29 / Country 30
8. This corporation has applied for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WOTTAWA, ROBERT 3076 30TH COURT JUPITER FL 33467	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and the date signed NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	P	11 TITLE	
12 NAME	WOTTAWA, ROBERT	12 NAME	
13 STREET ADDRESS	3076 30TH COURT	13 STREET ADDRESS	
14 CITY ST ZIP	JUPITER FL	14 CITY ST ZIP	
21 TITLE	V/P	21 TITLE	
22 NAME	WOTTAWA, JOANN	22 NAME	
23 STREET ADDRESS	3076 30TH COURT	23 STREET ADDRESS	
24 CITY ST ZIP	JUPITER FL	24 CITY ST ZIP	
31 TITLE		31 TITLE	
32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY ST ZIP		34 CITY ST ZIP	
41 TITLE		41 TITLE	
42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY ST ZIP		44 CITY ST ZIP	
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY ST ZIP		54 CITY ST ZIP	
61 TITLE		61 TITLE	AR7511
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jo Ann Wottawa Jo Ann Wottawa 4/29/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0008563

To Whom It May Concern,

I misplaced the 1995 Document. My account gave me this one from last year.

Sincerely,

John Wotherspoon