

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S77768** (7)

1. Corporation Name

J.O. SERVICES, INC.



Principal Place of Business

**12189 U.S. HIGHWAY 1
SUITES 4 & 5
NORTH PALM BEACH FL 33408**

Mailing Address

**12189 U.S. HIGHWAY 1
SUITES 4 & 5
NORTH PALM BEACH FL 33408**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**WOTTAWA, ROBERT
3076 30TH COURT
JUPITER FL 33467**

3. Date Incorporated or Qualified
09/04/1991

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0282281

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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
1904 ASCOTT RD

83 **JUNO ISLES**

84 City

FL 85 Zip Code
33408

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 607.0605, Florida Statutes.

SIGNATURE

Robert Wottawa
Signature, typed or printed name of registered agent and the day, month, and year.

(If the Registered Agent signing requires when not signing)
1/24/96

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **WOTTAWA, ROBERT**
STREET ADDRESS **3076 30TH COURT**
CITY-ST-ZIP **JUPITER FL**

TITLE **VP** ☐ DELETE
NAME **WOTTAWA, JOANN**
STREET ADDRESS **3076 30TH COURT**
CITY-ST-ZIP **JUPITER FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☒ Change ☐ Addition
1.2 NAME **WOTTAWA, ROBERT**
1.3 STREET ADDRESS **1904 ASCOTT RD**
1.4 CITY-ST-ZIP **JUNO ISLES FL 33408**

2.1 TITLE **VP** ☒ Change ☐ Addition
2.2 NAME **WOTTAWA, JO ANN**
2.3 STREET ADDRESS **1904 ASCOTT RD**
2.4 CITY-ST-ZIP **JUNO ISLES FL 33408**

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

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(k), 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:

Robert Wottawa
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/96 694-7878
Date Daytime Phone #

CR2E034 (12/95)