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 # V00355

1. Corporation Name

JAYCO MARKETING CO

| JATGO | WANNETHING CO. | | | | | | | | |
|-------------------------------------|--|---------------------------------------|------------------------------|--------------------|-------|--------------------|--|-------------------------------|-----------------------------|
| Principal Place | e of Business | Mailin | ng Address | | | | A TOBEL BILDIS ROTEL ORIRO (1100 ATER) DITE AS | EFI 01016 01011 0101 | I BIBIK KIBIL LUDI |
| 5800 OVERSEA | S HWY | | 5800 OVERSEAS HWY | | | | | | : |
| STE - 35-151 | | STE - | STE - 35-151 | | | | DO MOS MIDITE IN T | 110 CD405 | |
| MARATHON FL 33050 MARATHON FL 33050 | | | | | | DO NOT WRITE IN TI | HIS SPACE | · | |
| us Us | | | | | | | 3. Date Incorporated or Qualifed | | |
| | | 9- 14 | - No A al d | | | | 12/13/1991 4. FEI Number | | nation For |
| - | lace of Business | | 2a. Mailing Address | | | | | ├ | pplied For |
| 21 | , | | 26 Suite, Apt. #, etc. | | | | 65-0342677 | | lot Applicable Additional |
| Suite, Apt. | #, etc. | | 27 | | | | 5. Certifcate of Status Desired | T | Required |
| City & Stat | <u> </u> | | City & State | | | | 6. Election Campaign Financing | | May Be |
| 23 | | ├ ─┐ | 28 | | | | Trust Fund Contribution | | i to Fees |
| Zip | Country | | Zip Country | | | | 8. This corporation owes the current year | Intangible | |
| 24 | 25 | ————————————————————————————————————— | 29 30 | | | | Personal Property Tax. | ∐Yes | □No |
| | 9. Name and Address of Curre | | ed Agent | 1921 | | | 10. Name and Address of New Register | ed Agent | |
| | | | | | 81 | Name | | | |
| JAR | os, robert | | | } | 82 | Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| 5800 | OVERSEAS HWY | | | İ | اء" | Street Add | ress (F.O. Box Humber is Not Acceptable) | | |
| STE | - 35-151 | | | ţ | 83 | | | **- | |
| MAR | ATHON FL 33050 | | | } | | | | 05 7:- | Code |
| | | | | | 84 | City | F | L 85 Zir | Code |
| office or r | to the provisions of Sections 607.03 egistered agent, or both, in the Stat m familiar with, and accept the oblig | e of Florida . | Such change was a | uthorized | hv t | -named corporati | poration submits this statement for the purpose on's board of directors. I hereby accept the ap | of changing i pointment as | ts registered registered |
| OIGNATORE | Signature, typed or printed name of registered as | | | | Agent | signature require | ed when reinstating) DATE | | |
| 12. | OFFICERS A | ND DIRECT | | 13. | | 1 | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | PST | | □ DELETE | 1.1 TB | | 1 | | Change | Addition |
| NAME | JAROS, ROBERT G | | | 1.2 NA | ME | | | | |
| STREET ADDRESS | 5800 OVERSEAS HWY / STE | - 35-151 | | 1.3 ST | REET | ADDRESS | | | |
| CITY-ST-ZIP | MARATHON FL | | | 1.4 C/I | | -ZIP | 78 | - Chance | Addition |
| TITLE | D | | ☐ DELETE | 2.1 TiT | | ļ | | Change | Addition |
| NAME | JAROS, ROBERT G | | | 2.2 NA | | ĺ | | | |
| STREET ADDRESS | 5800 OVERSEAS HWY / STE | - 35-151 | | | | ADDRESS | | 44 | |
| CITY-ST-ZIP | MARATHON FL | | O BELETE | 2. 4 CF | | ZIP | | [7] Change | Addition |
| TITLE | | , | ☐ DELETE | 3.1 TIT | | | | LJ Change | |
| NAME ** | • | | | 3.2 NA | | | | | |
| STREET ADDRESS | • | | | | | ADORESS | | | |
| CITY-ST-ZIP | | | ☐ DELETE | 3.4. CF 4.1 TTT | | -ZIP | | [] Change | Addition |
| TITLE | | | □ NETE IE | | | ļ | | LJ Orlange | . CJ Addition |
| NAME | | | | 4.2 NA | | | | | |
| STREET ADDRESS | | | | - 1 | _ | ADDRESS | | | |
| CITY-ST-ZIP | | | ☐ DELETE | 4.4 CIT | _ | - ZIP | | Change | Addition |
| TITLE | | | T ACTRIC | 5.1 TIT 5.2 NA | | | | C) change | |
| NAME | | | | | | ADDRESS | | | |
| STREET ADDRESS | | | | | | | | | |
| CITY-ST-ZIP | | ' ; | ☐ DELETE | 5.4 CIT 6.1 TIT | | -41F | | ☐ Change | Addition |
| TITLE | 3. Aphinia y sole mitota | | - AETELE | 6.2 NA | | { | • | onunge | |
| NAME ESS | | | | | | ADDRESS | | | |
| STREET ADDRESS | | | | 9.001 | | | | | |
| C/TY-ST-ZIP | > #출입 [변화] [편집합 4 <u>7 원</u> > | | | 6.4 CIT | V_0T | -710 J | | | |

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 perporation of the receiver or trustee impowered 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:

SIGNATURE AND TYPED OR POINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90025 024 ***150.00