

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 # **V05086** (6)

1. Corporation Name
JD ESTATES, INC.



Principal Place of Business
**6654 VILLA SONRISA DR #410
BOCA RATON FL 33433**

Mailing Address
**6654 VILLA SONRISA DR #410
BOCA RATON FL 33433**

2. Principal Place of Business
21 **14609 SUNNY WATERS LN.**
Suite, Apt. #, etc.

2a. Mailing Address
26 **14609 SUNNY WATERS LN.**
Suite, Apt. #, etc.

City & State
23 **DELRAY BEACH, FL**

City & State
28 **DELRAY BEACH, FL**

Zip
24 **33484**

Country
25 **USA**

Zip
29 **33484**

Country
30 **USA**

3. Date Incorporated or Qualified
01/06/1992

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

4. FEI Number
65-3035861

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROSENZWEIG, DAVID
6654 VILLA SONRISA DR #410
BOCA RATON FL 33433**

81 Name **ROSENZWEIG, DAVID**
82 Street Address (P.O. Box Number is Not Acceptable)
14609 SUNNY WATERS LANE
83
84 City **DELRAY BEACH FL** 85 Zip Code **33484**

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

Signature of Registered Agent (Required when Registered Agent is changed)

Signature of Registered Agent (Required when Registered Agent is changed)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
☐ DELETE	D ROSENZWEIG, DAVID	6654 VILLA SONRISA DR	DELRAY BEACH, FL 33484
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			

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 this corporation or the receiver or trustee or powers to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 and changed, or in any attachment with an address.

SIGNATURE: **David Rosenzweig**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/96 (407) 495-1763
Date and Phone #

CR2E034 (12/95)