## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(5)

J & M ENTERPRISES OF ORLANDO, INC.

**FILED** Mar 04 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address							T 1980 I BUILD ON OUT OF THE OFFICE AND A SEAL OFFI	i dirii sidii bid	II DYBYL BABIL (DDI
1	15 W GORE	ST	P O BOX 568798	P O BOX 568798					
ORLANDO FL 32806			ORLANDO FL 32806	•			DO NOT WRITE IN THIS SPACE		
U	IS		U\$	<b>;</b>			3. Date Incorporated or Qualified		
							01/10/1992		
2. Principal Place of Business 2a. Mailing A				Address			4. FEI Number		Applied For
21	26						59-3111781		Not Applicable
	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	uite, Apt. #, etc.			5. Certificate of Status Desired	T	5 Additional
22	27								Required
	City & State	9	City & State	City & State		6. Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees	
23	Zip	Country Zip Cou		Coun	trv		8. This corporation owes or has paid the		
24	Lip	25	29	30			Personal Property Tax due June 30.	Yes	No
271	9. Name and Address of Current Registered Agent						10. Name and Address of New Registe	red Agent	
FLOWER, BRUCE ATTN						Name			
PAR BE BARNES AND AND				32	Street Addres	ss (P.O. Box Number is Not Acceptable)			
MAJTLAND FL 32751								*****	
				8	33				
				- E	34	City		<b>85</b>	Zip Code
								FL   "	
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									
Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered					Agen	nt signature required			TODO IVI 40
12.		OFFICERS AND DIRECTORS 13.		13.	<u>.                                    </u>	<del></del>	ADDITIONS/CHANGES TO OFFICERS	Char	
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NAN	[		*** ***			ADDOCCO			
	EET ADDRESS	ORLANDO FL		1.4 C(T)		ADDRESS 710			
TITL	r-ST-ZIP	CEOD	☐ DELETE	2.1 TiTL				Char	ige Addition
NAN	·			2.2 NAM					
	EET ADDRESS	115 W GORE ST	•••		2.3 STREET ADDRESS				
	-ST-ZIP	ONL TAIM OF		2. 4 C/T			**	•	
TITL				3.1 TiTL	.E			Char	ige Addition
NAM	ME			3.2 NAME					
STRI	REET ADDRESS			3.3 STREET ADDRESS		address			
City	Y-ST-ZIP			3.4. CITY - ST - ZIP		T-ZIP			
TITL	E	_		4.1 TITL	E			L Char	ige L. Addition
NAM	RE			4. 2 NA	ME				
STRI	EET ADDRESS			4.3 STR	EET A	ADDRESS			
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STRI	EET ADDRESS			5.3 STREE					1
	f-ST-ZIP				5.4 CITY-ST-ZIP				nge Addition
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	- 1		Deteit	6.1 TITL				☐ Char	inge C Modellon
NAM	AE		_ J DELETE	6.2 NAM	Æ			Char	ige Rodinon
	- 1			6.2 NAM	AE Eet a	ADDRESS		Char	NGE NOGRIDII

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 atlachment with an address.