Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90154 016 ***300.00

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 # V06010

1. Corporation J&MEI	NTERPRISES OF ORLANDO	, INC.					
Principal Place	of Business	Mailing Address			1 (881) 311011 88110 91111 88183 11313 9811 91611	****** * ***** *	
ORLANDO FL 32806		P O BOX 568798 ORLANDO FL 32806 US		DO NOT WRITE IN THIS SPACE			
	•				 Date Incorporated or Qualifed 01/10/1992 		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
21 640	Lee Road	26			59-3111781		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75	
22	ويسوخو سحت يؤني ينجو يتسبت	8 27					quired
City & State City & State City & State City & State 28					6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip	Country		8. This corporation owes the current year In		_
24 83	2810 25 ORANGE	29 30)		Personal Property Tax.	☐Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
FI 01	WED BOUGE ATTN		81	Name			
FLOWER, BRUCE ATTN			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
511 N MAITLAND AVE			<u> </u>				
MAH	LAND FL 32751		83				
			84	City	FL	85 Zip (Code
agent. I ar	to the provisions of Sections 607.0502 gigstered agent, or both, in the State on familiar with, and accept the obligation of the obligati	ons of, Section 607.0305, Florida	a Statutes		poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoint of the purpose of the	intment as re	gistered
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DPO	☐ DELETE	1.1 TITLE	ļ		Change	Addition
NAME	CARDINAL, JAMES R.		1.2 NAME)
STREET ADDRESS	115 W GORE ST		1.3 STREE	TADDRESS			
CITY-ST-ZIP	ORLANDO FL			T-ZIP			
IIITE	CEOD DELETE 2.1		2.1 TTLE	}		☐ Change	Addition
NAME	ADAMS, W.E. MANNY		2.2 NAME		·		
STREET ADDRESS	115 W GORE ST	_	2.3 STREET	ADDRESS .			<i>~</i> .
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY-5	IT-ZIP			
TITLE		☐ DELETE	3.1 TTTLE		·	☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-5	T-ZIP			
TITLE		DELETE 4.1 TI				Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			l
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				Į
STREET ADDRESS			5.3 STREE	T ADDRESS			

CITY-ST-ZIP . 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 suppliemental 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

Kiesidail James R Cardinol

☐ Change

Addition