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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V14144

(2)

JONATHAN'S PRIDE & JENNIFER'S TOO. INC.

May 06 1998 8:00am Secretary of State

	THAN'S PHIDE (X JENNIFER'S								
\	ce of Business		Mailing Address					}		
11924 FORE WELLINGTO	'5 BRITTEN LANE LINGTON FL 33414									
US			US					DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified		
6 Dringing!	Place of Business		20 14	ailing Address				02/13/1992 4. FEI Number		aliant Far
2. Principari	riace of Business		26 Viaming Address					05-0318171		plied For it Applicable
Suite, Apl	. #, etc.			Suite, Apt. #, etc.					\$9.75	
22		i	27	7				5. Certificate of Status Desired	Fee Re	
Crty & Sta	ite		С	City & State				6. Election Campaign Financing	\$5.00	May Be
23			28				Trust Fund Contribution Added to Fees			
Zip	⊢¬	untry	Zı	þ	Cour	itry	•	8. This corporation owes or has paid to		
24	25	dress of Current Re	29		30			Personal Property Tax due June 30. 10. Name and Address of New Regist		No
		diess of Carrent He	Aire	ec Agent		81	Name	10. Hame and Address of Rew Hegist	iaion Afairr	
JOHN FROEHLICH 13686 CALLINGTON DR										
						82	Street Addre	Iress (P.O. Box Number is Not Acceptable)		
WELLINGTON FL 33414						83				
					[.	_				
						84	City		FL 85 Zip (Code
office or	registered agent, or t am familiar with, and	noth in the State of F	lorida is of, S	Such change was a ection 607.0505, Flo	uthorized orida Statu	by nes	the corporation	oration submits this statement for the purp on's board of directors. I hereby accept th	ose of changing it appointment as	s registered registered
12.	Signature, typied or present	OF FICERS AND DI			13.	Age	ni signature require	ADDITIONS/CHANGES TO OFFICER		S IN 12
TITLE	PSD			DELETE	1.1 TITE	E		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change	Addition
NAME	AE BRACKMAN, STEPHEN			1.2 N			Ì			
STREET ADDRESS				1.3 5			ADDRESS			
CITY-ST-ZIP	HTY-ST-ZIP WELLINGTON FL						T-ZIP			
TITLE	!			☐ DELETE	2.1 T/TL	.E			☐ Change	Addition
NAME					2.2 NAM					
STREET ADDRESS							ADDRESS			i
CITY-ST-ZIP	 			☐ DELETE	2 4 (11		ST-ZIP		Change	Addition
TITLE NAME				LJ DECER	3.1 TITL 3.2 NAM				L ∪narige	- Maningu
STREET ADDRESS	1						ADDRESS			
STREET ADURESS					3.4. CIT		4			
TITLE	<u> </u>			DELETE	4.1 TITL		21 - 291		Change	Addition
NAME				_	4. 2 NA				_ •	
STREET ADDRESS	•						ADDRESS			
CITY-ST-ZIP	<u>L</u>				4.4 CITY	/- SI	T-ZIP			
TITLE			,	☐ DELETE	5.1 TiTe	E			☐ Change	Addition
NAME					5.2 NAM	Æ				
STREET ADDRESS					5.3 STR	EET .	ADDRESS			
CITY-ST-ZIP		·			5.4 CITY		T-ZIP			
TITLE	I			DELÊTE	6.1 TITL	Ε	- 1		Change	Addition

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 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.

63 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

89h Rn

STEPNON RAJONIAN 4-2898

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