2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # G41431 Feb 08, 2000 8:00 am 1. Entity Name JIREH, INC. **Secretary of State** 02-08-2000 90073 017 ***150.00 Principal Place of Business Mailing Address 43309 U.S. HIGHWAY 19 NORTH 43309 U.S. HIGHWAY 19 NORTH TARPON SPRINGS FL 34689 P.O. BOX 1608 TARPON SPRINGS FL 34688-1608 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2293309 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FRIEDLAND, LEW Street Address (P.O. Box Number is Not Acceptable) 43309 U.S. HIGHWAY 19 NORTH TARPON SPRINGS FL 34689 Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change DVP TITLE ☐ Addition TITLE Delete TAYLOR, JOYCE NAME NAME STREET ADDRESS STREET ADDRESS 43309 US HWY 19 N. CITY-ST-ZIP CITY-ST-ZIP TARPON SPRINGS FL DVST Change ☐ Addition ☐ Delete TITLE TITLE FORD, DAVID NAME STREET ADDRESS 43309 U.S. HIGHWAY 19 N. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TARPON SPRINGS FL ☐ Change ☐ Addition TITLE TITLE □ Delete FRIEDLAND, LEW NAME NAME 43309 U.S. HIGHWAY 19 N. STREET ADDRESS SINCE+ AUUHESS CITY-ST-ZIP CITY-ST-ZIP TARPON SPRINGS FL Addition Change Delete TITLE DV TITLE aldridge, Daniel NAME NAME STREET ADDRESS STREET ADDRESS 43309 U.S. HIGHWAY 19 N. CITY-ST-ZIP TARPON SPRINGS FL CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE MIONE, JOHN K NAME NAME STREET ADDRESS STREET ADDRESS 43309 U\$ HWY 19 N. CITY-ST-ZIP CITY-ST-7IP TARPON SPRINGS FL Change Addition ☐ Delete TITLE TITLE GRUNDY, T-SHEA NAME NAME 43309 US HWY 19 N STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-ZIP TARPON SPRINGS FL 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like singlewered. EN FREDLAND SIGNATURE: