

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2000 8:00 am
Secretary of State

02-15-2000 90045 028 ***150.00

DOCUMENT # P96000011776

1. Entity Name
JEROLD'S LEGAL CREDITCARD CORPORATION

Principal Place of Business Mailing Address
400 S.W. 107 AVE **400 S.W. 107 AVE**
300 **# 300**
MIAMI FL 33174 **MIAMI FL 33174-8400**
US **US**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0721666** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BERTRAN, JOSE L.
1120 N.W. 124 PLACE
MIAMI FL 33182

7. Name and Address of New Registered Agent
 Name **BERTRAN, JOSE L.**
 Street Address (P.O. Box Number is Not Acceptable)
1170 N.W. 125 Ct.
 City **MIAMI** FL Zip Code **33182**

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 *Jose Luis Bertran* DATE **2/7/00**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete BERTRAN, JOSE LUIS 1120 NW 124 PL MIAMI FL 33182	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP	<input checked="" type="checkbox"/> Delete ECHEGARAY, WELLINGTON 1120 N.W. 124 PLACE MIAMI, FL 33182	TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	VP ECHEGARAY, ZAHIRA 2880 S.W. 137 AVE. MIAMI, FL 33175
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 empowered.

SIGNATURE: *Jose Luis Bertran* Date **2/7/00** Daytime Phone # **(305) 207-8814**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)