

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90169 044 ***150.00

DOCUMENT # P97000073367

1. Entity Name
W.J. JONES BUILDERS, INC.



Principal Place of Business
**3009 NW 7TH CT
FORT LAUDERDALE FL 33311
US**

Mailing Address
**P O BOX 120622
FORT LAUDERDALE FL 33312-0011**

2. Principal Place of Business

**1314 EAST LAS OLAS BLVD.
Suite, Apt. #, etc.
#22**

3. Mailing Address

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FL

City & State

4. FEI Number

65-0790842

Applied For

Not Applicable

Zip

33301

Country

U.S.

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**JONES, WALTER J
3009 NW 7TH CT
FORT LAUDERDALE FL 33311**

7. Name and Address of New Registered Agent

Name

JONES, WALTER J.

Street Address (P.O. Box Number is Not Acceptable)

1314 E. LAS OLAS BLVD. #22

City

FORT LAUDERDALE

FL

Zip Code

33301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **WALTER, JAMES JONES**
STREET ADDRESS **3009 NW 7TH CT**
CITY-ST-ZIP **FORT LAUDERDALE FL 33311**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **WALTER JAMES JONES**
STREET ADDRESS **1314 EAST LAS OLAS BLVD #22**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33301**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **WALTER J. JONES** **WALTER J. JONES** 9/21/03 (954)895-0842

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment #
11009507
\$97000073367

IN THE EVENT THAT ANYTHING HAPPENS CONCERNING
THIS BUSINESS REPORT AND MONEY ORDER I
WILL TAKE FULL RESPONSIBILITY. I AM UNABLE
TO SEND A CHECK AT THIS TIME.

Walter Jones

