


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90168 028 ***150.00

DOCUMENT #
1. Entity Name JR'S EXCAVATION SERVICE INC
797000084785 ✓



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
662 Bell Rd.
Suite, Apt. #, etc.

3. Mailing Address
1659 OPENFIELD LOOP
Suite, Apt. #, etc.

City & State
Sarasota FL.

City & State
Brandon FL.

Zip
34240

Country
SARASOTA

Zip
33510

Country
Hills.

4. FEI Number
3470268

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Shelle K OTSO PA CPA

Street Address (P.O. Box Number is Not Acceptable)
2010 Pine Terrace

City
SARASOTA | FL | Zip Code
34231

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 Shelle K O40 (NOTE: Registered Agent signature required when reinstating) DATE 2-28-03

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP <u>PRESIDENT</u> <u>LEO R. AVERA</u> <u>1659 OPEN FIELD LOOP</u> <u>BRANDON FL 33510</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>DO NOT WRITE IN THIS SPACE</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>V. PRESIDENT</u> <u>KATHRYN J. AVERA</u> <u>1659 OPEN FIELD LOOP</u> <u>BRANDON FL 33510</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>DO NOT WRITE IN THIS SPACE</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>SEC. TREAS.</u> <u>KATHRYN J. AVERA</u> <u>1659 OPEN FIELD LOOP</u> <u>BRANDON FL 33510</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>DO NOT WRITE IN THIS SPACE</u>
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Leo R. Avera LEO R. Avera 4/11/03 (941) 809-5826
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)