

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S23660

1. Entity Name
JENCOB CORP.

FILED
Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90019 018 ***150.00

Principal Place of Business 2445 HOLLYWOOD BLVD SUITE 105 HOLLYWOOD FL 33020 US	Mailing Address 2445 HOLLYWOOD BLVD SUITE 105 HOLLYWOOD FL 33020-6605 US
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2. Principal Place of Business 3850 HOLLYWOOD BLVD Suite, Apt. #, etc. 402 City & State HOLLYWOOD, FL 33020 Zip 33021 Country US	3. Mailing Address 3850 HOLLYWOOD BLVD Suite, Apt. #, etc. 402 City & State HOLLYWOOD, FL 33020 Zip 33021 Country US
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DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0237555	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MORGAN, RUTH D
2445 HOLLYWOOD BLVD.
SUITE 105
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent
Name
HOWARD ROMER
Street Address (P.O. Box Number is Not Acceptable)
3850 HOLLYWOOD BLVD
SUITE 402
City
HOLLYWOOD FL Zip Code
33021

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 *Howard Romer* Howard Romer DATE *June 30 2000*
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

TITLE D	<input type="checkbox"/> Delete
NAME MORGAN, RUTH D	
STREET ADDRESS 2445 HOLLYWOOD BLVD., SUITE 105	
CITY-ST-ZIP HOLLYWOOD FL 33020	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Howard Romer	
STREET ADDRESS 3850 Hollywood Blvd Suite 402	
CITY-ST-ZIP Hollywood, FL 33021	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Howard Romer* Howard Romer DATE *June 30, 2000* 954 964 6692
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)



HOWARD ROMER & CO.
ACCOUNTANTS

3850 HOLLYWOOD BOULEVARD SUITE 402
HOLLYWOOD, FLORIDA 33021
TELEPHONE (305) 964-6692
FAX (305) 964-8059

July 11, 2000

Attachment
S23660
DW72883

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: JENCOB CORP.
DOCUMENT # S23660

A blank form was requested when the Corporation did not receive the form to timely file its report. Subsequently, the original form was forwarded to us from the recipients of the mail.

Accordingly, we are able to prepare the Report on the original form. In view of the foregoing, we request you abate the late filing penalty.

Sincerely,

For copies of the form please contact the Division of Corporations, Tallahassee, Florida 32302-1500. The fee for the form is \$10.00. The fee for the report is \$10.00. The fee for the filing is \$10.00. The fee for the late filing penalty is \$10.00. The fee for the late filing penalty is \$10.00. The fee for the late filing penalty is \$10.00.