2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

UNIFORM BUSINESS REPORT (UIDOCUMENT # \$62359

1. Entity Name

J. B.'S JEWELRY & PAWN II, INC.



FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90136 015 ***150.00

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2611 LEE RD. 2611 LEE			Mailing Address 2611 LEE RD. WINTER PARK FL 32789)					
2. Principal Place of Business			3. Mailing Address			1 10 21 10 11 20 11 11 11 11 11 11 11 11 11 11 11 11 11			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State			4 CC 1			For
Zip Country			Zip Country			4. FEI Number 59-3075148		Not App	plicable
<u> </u>		ţ.	·	·		5. Certificate of Status Desired	Fee Ro	5 Additional equired	al .
	6. Name and Addre	ss of Current Re	gistered Agent	Na	me	7. Name and Address of New F	Registered Agent		
BREADY,	JOHN, II								
2611 LEE	RD.			Str	eet Address (f	P.O. Box Number is Not Acceptable	e)		
WINTER	PARK FL 32789				·	"	······································		
				City	У		FL Zip	Code	
8. The above	e named entity submits thations of registered agent.	is statement for th	e purpose of changing its	s registered offi	ce or registere	ed agent, or both, in the State of Fk		with, and a	accept
SIGNATURE									
	Signature, typed or printed name	of registered agent and t	itle if applicable. (NO	TE: Registered Agent	signature required	when reinstating)	DATE		
Afte	FILE NOW!!! FEE IS Ir May 1, 2003 Fee will k Payable to Florida De	be \$550.00	ate			9. Election Campaign Fir Trust Fund Contributio	`	\$5.00 Ma	
10.	OF	FICERS AND DIR	ECTORS	11.		ADDITIONS/CHANGES TO OFF	CERS AND DIREC	TORS IN 1	1
TITLE NAME STREET ADDRESS	D BREADY, JOHN, II 2611 LEE RD.		☐ Delete	TITLE NAME STREET ADDR	HESS		☐ Cha		Addition
CITY-ST-ZIP	WINTER PARK FL			CITY-ST-2IP					
NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAME STREET ADDR CITY-ST-ZIP	ESS		☐ Cha	.nge 🗌 /	Addition
TITLE NAME			☐ Delete	TITLE			Cha	nge	Addition
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CITY-ST-ZIP				STREET ADDRE	SS				

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:

SICAL STATE OF SIGNING OFFICER OR DIRECTOR

1/9/03 407644465