2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

276465 **DOCUMENT #**

1. Entity Name

J & M PUMP SERVICE, INC.



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

02-13-2003 90214 028 ***150.00

Principal Place of Business 12065 METRO PARKWAY FT MYERS FL 33912		12065 METRO PARKWAY FT MYERS FL 33912							
. Principal Plac	e of Business	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES Applied For			
		City & State				9-1029660	\$8.75 Additio	pplicable nal	
Zip	Country	Zip	Count	y	5. Certificate of Sta	atus Desired	Fee Required		
	6. Name and Address of Currer	nt Registered Agent		Name	/ Name and Add	1000 011101111100100100100			
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CORPORATION SERVICE COMPANY				Street Addres	s (P.O. Box Number is I	Not Acceptable)			
1201 HAYS				<u> </u>				ļ	
TALLAHASS	SEE FL 32301-2525						Zip Code		
				City		FL	- '		
			na ita raciata-	ed:office or regis	stered agent, or both, in	the State of Florida. I am	familiar with, an	d accept	
8. The above r	named entity submits this statement	t for the purpose of changii	ng its register	ou amos or regi	J			1	
the obligation	ons of registered agent.								
OIGNATURE			(MOTE: O	ed Agent signature reg	quired when reinstating)	DATE			
SIGNATURE _	Signature, typed or printed name of registered ag	gent and title if applicable.	(NUTE: Hegister	ou regard argulature red	_ 				
	LE NOW!!! FEE IS \$150.00				9. Election	on Campaign Financing	\$5.00 ☐ Added t	May Be	
After	May 1, 2003 Fee will be \$550.0	00			Trust F	Fund Contribution.	∟ Added t		
Make Check	Payable to Florida Department	t of State			ADDITIONS IOU	IANGES TO OFFICERS AN	ID DIRECTORS	IN 11	
	OFFICERS A	ND DIRECTORS	11				☐ Change	Addition	
10.	D	☐ Delete				ILGAMAN		-	
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Thereby Certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: