

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 336506

1. Entity Name

D J FORMS COMPANY, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90368 001 ***150.00

960453



DO NOT WRITE IN THIS SPACE

Principal Place of Business

6800 N AUGUSTA DR
MIAMI FL 33015

Mailing Address

6800 N AUGUSTA DR
MIAMI FL 33015

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 4864

Suite, Apt. #, etc.

City & State

City & State

HALEAH, FLORIDA

4. FEI Number

59-1277292

Applied For

Not Applicable

Zip

Country

Zip

Country

33014

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MERRILL, GAIL S
6800 N AUGUSTA DR
MIAMI FL 33015

7. Name and Address of New Registered Agent

Name

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

City

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 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
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
MERRILL, GAIL S
6800 N AUGUSTA DR
HALEAH, FL 33015 MIAMI, FL 33015 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
MERRILL, MYRON C
6800 N AUGUSTA DR.
MIAMI FL 33015 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AVP
MERRILL, DONNA J.
15525 MIAMI LAKEWAY #204
MIAMI LAKES FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ASST VP
MERRILL, DAWN J.
6800 N AUGUSTA DRIVE
MIAMI, FLORIDA 33015 ☐ Change ☒ Addition

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

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

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gail S. Merrill GAIL S. MERRILL

4-20-01

Date

(305) 829-0058

Daytime Phone #

CR2E034 (10/00)