

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90135 046 ***150.00

DOCUMENT # 368538



1. Entity Name
JEFFREY-ALLEN, INC.

Principal Place of Business
**2808 29TH AVENUE EAST
BRADENTON FL 34208
US**

Mailing Address
**P. O. BOX 1520
BRADENTON FL 34206**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1302702**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SVERDLOW, ALAN B
601 LONGBOAT CLUB RD
LONGBOAT KEY FL 33548**

Name

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

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	SVERDLOW, ALAN B	
STREET ADDRESS	601 LONGBOAT CLUB RD	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SVERDLOW, JEFFREY C	
STREET ADDRESS	15221 51ST ST WEST	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	S	<input type="checkbox"/> Delete
NAME	SVERLOW, BENJAMIN	
STREET ADDRESS	5511 LEGACY CRESENT PLACE #104	
CITY-ST-ZIP	RIVERVIEW FL 33569	
TITLE	T	<input type="checkbox"/> Delete
NAME	SVERLOW, BENJAMIN	
STREET ADDRESS	5511 LEGACY CRESENT PLACE #104	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	SVERLOW, ALAN B.	
STREET ADDRESS	601 LONGBOAT CLUB RD.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	C	<input type="checkbox"/> Delete
NAME	SVERDLOW, JEFFREY C	
STREET ADDRESS	1521 51ST ST WEST	
CITY-ST-ZIP	BRADENTON FL 34209	

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	
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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	

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:

SIGNATURE REQUIRED

Alan B. Sverdlow
President

1/31/03 941-747-1501

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (10/02)