## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Mar 06, 2001 8:00 am **DOCUMENT # 446569 Secretary of State** 1. Entity Name JAAS CORP. 03-06-2001 90102 036 \*\*\*150.00 Principal Place of Business Mailing Address 748 WESTMORELAND RD. 748 WESTMORELAND RD. DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1515830 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SESSION, JOHNNY VAN Street Address (P.O. Box Number is Not Acceptable) 724 ORANGE AVENUE DAYTONA BEACH FL 32114-4773 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, lyped 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (10/00) Change Addition TITLE ☐ Delete TITLE SESSION, JOHNNY VAN MAME NAME 724 ORANGE AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE ADAMS, JOE NAME NAME 748 WESTMORELAND ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7iP DAYTONA BEACH FL 32114 CITY-ST-7IP Change ☐ Delete TITLE TITLE ALLEN, COLUMBUS ... NAMÊ NAME STREET ADDRESS **441 LINCOLN STREET** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114 TD TITLE Change ☐ Addition ☐ Delete TITLE NAME JONES, CURTIS NAME 213 GARDEN STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/01

904-252-8396

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