

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90011 022 ***158.75

DOCUMENT # 517799

1. Entity Name
J & J BUILDING ENTERPRISES, INC.

Principal Place of Business

**6950 CYPRESS ROAD
 #211B
 PLANTATION FL 33317
 US**

Mailing Address

**P.O. BOX 26593
 TAMARAC FL 33320
 US**

2. Principal Place of Business

1010 JOHN'S POINT DR

3. Mailing Address

Suite, Apt. #, etc.

City & State

WINTER GARDEN FL

City & State

Zip

Country

34787

Country

ORANGE

4. FEI Number

59-1680465

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SHNIDER, RON
 1333 S. UNIVERSITY DRIVE
 STE 201
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name **JEREL M. MILLER**

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

1017 JOHN'S POINT DRIVE

City **WINTER GARDEN**

FL

Zip Code

34787

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]

JEREL M. MILLER

CEO

3/12/02

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, 2002 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 **PSD** ☐ Delete
 NAME **MILLER, JEREL M**
 STREET ADDRESS **1017 JOHN'S POINT DRIVE**
 CITY-ST-ZIP **WINTER GARDEN FL 34787**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CEO, DIRECTOR** ☒ Change ☐ Addition
 NAME **MILLER, JEREL M**
 STREET ADDRESS **1017 JOHN'S POINT DRIVE**
 CITY-ST-ZIP **OAKLAND, FL 34787**

TITLE **PRESIDENT, DIRECTOR, SECRETARY** ☒ Change ☐ Addition
 NAME **COSTELLO, JAMES J. JR.**
 STREET ADDRESS **1010 JOHN'S POINT DRIVE**
 CITY-ST-ZIP **OAKLAND, FL 34787**

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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, with all other officers empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/02

Date

954 572 4924

Daytime Phone #

CR2E034 (9/01)