

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 614170**

1. Entity Name

JACA LAND, INC.

Principal Place of Business

**1428 BRICKELL AVE., #105
MIAMI FL 33131**

Mailing Address

**1428 BRICKELL AVE., #105
MIAMI FL 33131-3409**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1955481

Applied For

Not Applicable

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

**HALPRYN ERNEST M
1428 BRICKELL AVE STE 105
MIAMI FL 33131**

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.

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PS	WEISBERG, ALAN J	290 NW 165 ST., PLAZA 700	MIAMI FL	ASSISTANT SECRETARY	WEISBERG, ALAN J	290 NW 165 ST PLAZA 700	MIAMI, FL 33169
T	BRAUSE, STEVEN G	290 N.W. 165 ST., PLAZA 700	MIAMI FL	VICE PRESIDENT	JUDITH A HOERNER	1428 BRICKELL AVE #105	MIAMI FL 33131
VPD	DEVACCHI, JOHN	1428 BRICKELL AVE., #105	MIAMI FL	PRESIDENT/DIRECTOR	ERNEST M HALPRYN	1428 BRICKELL AVE #105	MIAMI FL 33131
D	LABIANCA, PHILIP	1428 BRICKELL AVE., #105	MIAMI FL	SECRETARY/TREASURER/D	LABIANCA, PHILIP	1428 BRICKELL AVE #105	MIAMI FL 33131

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:

ERNEST M HALPRYN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-22-00

305 371-4112

Date

Daytime Phone #

FILED
Apr 19, 2000 8:00 am
Secretary of State

04-19-2000 90112 046 ***150.00

LU066333

DO NOT WRITE IN THIS SPACE