

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90119 014 ***158.75

DOCUMENT # 643871

1. Entity Name

JOB OPPORTUNITY BUSINESS SPECIALISTS, INC.

Principal Place of Business

**797 DOUGLAS AVE.
ALTAMONTE SPRINGS FL 32714
US**

Mailing Address

**797 DOUGLAS AVE.
ALTAMONTE SPRINGS FL 32714
US**

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

59-1947618

Applied For

Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SALVAGIO, DENNIS L.
1212 RIDGEWOOD STREET
ORLANDO FL 32803**

7. Name and Address of New Registered Agent

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

**PD
PAGE, CARLA
2419 VIA GENOVA
APOPKA FL**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**STD
PAGE, WAYNE
2419 VIA GENOVA
APOPKA FL**

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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

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☐ 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:

Carla M. Page
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 2, 2001
Date

407-774-5627
Daytime Phone #

CR2E034 (5/01)

Attachment DEC #

643871

A0076259

Job Specialists

797 douglas ave. * suite 151 * altamonte springs, fl 32714 * (407) 774-jobs * fax (407) 774-4243

July 2, 2001

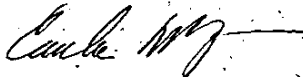
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

Enclosed please find my completed 2001 UBR along with my check in the amount of \$150.00, plus the \$8.75 fee required for a Certificate of Status, as I had not previously received a 2001 Uniform Business Report, therefore was unable to submit it earlier.

Thank you for your consideration in this matter.

Very truly yours,



Carla M. Page, CPC
President

ENC:

CMP/cjm