2000 UNIFORM BUSINESS REPORT (UBR)
FILED

1. Entity Nam	MENT # 736155 -tequesta junior woman	I'S CL	UB, INC.				M	ar 20, Secreta	ry o	0 8:00 f Sta	te	Ì
Principal Plac	e of Business	Mailir	ng Address									
			I BOX 3811 EXTA FL 33469-1013			<u> </u>	,, ~		~ . -			
•							 	DO 12510 G aldi (Codo di). 11 6 111 818)1 616	ı azen ezeni Aiği		
2. Principal Place of Business 3. M		3. Ma	ailing Address									
Suite, Apt. #, etc. Su		ite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE							
City & State C		Cit	y & State				4. FEI Number Applied For Not Applicable					1
Zip	Country	Zip		Cou	ntry		5. Certificate of	f Status Desired		\$8.75 Addi		
	6. Name and Address of Current	Register	od Agent		Name		7. Name and A	Address of New I	Registered /	Agent		-
SHERYL MOLTER			\ \								1	
						(P.O. Box Number is Not Acceptable)					4	
	. RIVER RIDGE ROAD A FL 33469		1									ļ
TEGOLO17	1 L 00100				City				FL	Zip Code		
SIGNATURE ,	Signature, typed or printed name of registered agent a FILE NOW: FEE IS \$61.25	T	plicable. (NOTE:	Financir		\$5.0 Added	when reinstating) O May Be I to Fees	De	epartment			
10.	OFFICERS AND DIF	ECTORS		11.		, A	ADDITIONS/CHAI	NGES TO OFFICE	RS AND DI] 6.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CSD PFEIFFER, CAROL 19170 WATERWAY RD TEQUESTA FL		☐ Delete			ļ				Change	☐ Addition	PF037 (9/99
TITLE NAME STREET ADDRESS	PD BAUM, JULIE 6490 WOOD LAKE RD		K. De ete			TD Ser 221	raes, Gin Shorewoo iter, FL	a d Way ₃₃₄₅	8	☐ Change	X Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JUPITER FL 33458 TD PUCCI, YVONNE 495 SOUTH BEACH RD. HOBE SOUND FL		☐ Delete	TITLE NAMI STRE		PD	1001, 12	3343		Change change	□ Addition only	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VPD MCINTYRE, MARGARET 19160 WATERWAY RD TEQUESTA FL 33477		☐ Delete		1					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD IRWIN, TAMMY 4242 ROBERT ST TEQUESTA FL 33469		☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RSD WEISBECKER, JANET 18996 SE CORAL REEF LANE JUPITER FL 33458		₩ Delete			112	vacano, Al L'Elsa Roa Diter, FL	ıd		☐ Change	反 Addition	

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 617, 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 AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/00 (Sel) 848-10656