

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B98000000724

1. Entity Name

JJS ASSET PARTNERS, L.P.

FILED
May 02, 2000 8:00 am
Secretary of State

Principal Place of Business

79 OAKHILL ROAD
RED BANK NJ 07701

Mailing Address

79 OAKHILL ROAD
RED BANK NJ 07701-5783

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P.O. Box 482

Suite, Apt. #, etc.

City & State

Red Bank, NJ 07701

Zip
07701

Country
USA

4. FEI Number

22-3457193

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

MARTIN, ALVIN C
2000 GLADES ROAD, SUITE 306
BOCA RATON FL 33431

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. Capital Contributions
as Shown on record.

\$280,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # F98000007063
NAME JJS HOLDING CO., INC.
STREET ADDRESS 79 OAKHILL ROAD
CITY - ST - ZIP RED BANK NJ 07701

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Signature of Alvin C. Martin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

April 24, 2000 (732) 542-2328

Date

Daytime Phone #