

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
 05-28-2002 91531 031 ***150.00

US/07/03 AV

DOCUMENT # F01000003092

1. Entity Name
JARET INTERNATIONAL (CS) INC.

Principal Place of Business
**2385 EXECUTIVE CENTER DRIVE, SUITE 190
 BOCA RATON FL 33431**

Mailing Address
**2385 EXECUTIVE CENTER DRIVE, SUITE 190
 BOCA RATON FL 33431**



2. Principal Place of Business

3. Mailing Address

5301 Legacy Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Plano, TX

4. FEI Number **13-3920701**

Applied For

Not Applicable

Zip Country

Zip

75024

Country

Collin

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

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **BARRATT, GREG**
 STREET ADDRESS **2385 EXECUTIVE CENTER DRIVE, SUITE 150**
 CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE **V** ☐ Delete
 NAME **NOFTALL, ROBERT C**
 STREET ADDRESS **2385 EXECUTIVE CENTER DRIVE, SUITE 150**
 CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE **V** ☐ Delete
 NAME **NODEN, NEIL**
 STREET ADDRESS **2385 EXECUTIVE CENTER DRIVE, SUITE 150**
 CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE **V** ☐ Delete
 NAME **HUNTLEY, CHARLES**
 STREET ADDRESS **2385 EXECUTIVE CENTER DRIVE, SUITE 150**
 CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE **V** ☐ Delete
 NAME **JAKUBEK, PAUL**
 STREET ADDRESS **2385 EXECUTIVE CENTER DRIVE, SUITE 150**
 CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE **V** ☐ Delete
 NAME **WALSH, MIKE**
 STREET ADDRESS **2385 EXECUTIVE CENTER DRIVE, SUITE 150**
 CITY-ST-ZIP **BOCA RATON FL 33431**

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 like empowered.

SIGNATURE: *[Signature]* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/02

Date

972-673-7354

Daytime Phone #

CR2E034 (9/01)