

2002 UNIFORM BUSINESS REPORT (UBR)

2

FILED
Mar 29, 2002 8:00 am
Secretary of State

02-14-2002 90090 034 ***150.00

DOCUMENT # F01000003265

1. Entity Name

TENNESSEE JETRUNNERS, INC.

Principal Place of Business

**7924 KISMET STREET
MIRAMAR FL 33023**

Mailing Address

**577 SOUTH LOWRY, #242
SMYRNA TN 37167**

406316



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2351 NW 150th Street
Suite, Apt. #, etc.

3. Mailing Address

2351 NW 150th Street
Suite, Apt. #, etc.

City & State

Opa-locka Florida

City & State

Opa-locka, Florida

4. FEI Number

62-1831088

Applied For

Not Applicable

Zip

Country

33054

Miami-Dade

Zip

Country

33054

Miami-Dade

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

MOORE, TIMOTHY

**7924 KISMET STREET
MIRAMAR FL 33023**

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

Timothy W. Moore

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-24-02

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

TITLE	PT	<input type="checkbox"/> Delete
NAME	MOORE, BLANCA INES	
STREET ADDRESS	7924 KISMET STREET	
CITY-ST-ZIP	MIRAMAR FL 33023	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	WILKINSON, DENNIS	
STREET ADDRESS	6907 E ZIMMERLY	
CITY-ST-ZIP	WICHITA KS 67207	
TITLE	S	<input type="checkbox"/> Delete
NAME	LOPEZ, MONICA	
STREET ADDRESS	8215 SW 152 AVE #408	
CITY-ST-ZIP	MIAMI FL 33193	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Timothy W. Moore	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	7924 Kismet street	
STREET ADDRESS	Miramar, FL- 33023	
CITY-ST-ZIP	Via President	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

MONICA LOPEZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/02 305-687-9095

Date

Daytime Phone #

CR2E034 (9/01)