

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F69530

1. Entity Name
J.H.M. CONTRACTORS, INC.

Principal Place of Business

13049 S.W. 122ND AVENUE
MIAMI FL 33186
US

Mailing Address

13049 S.W. 122ND AVENUE
MIAMI FL 33186
US

2. Principal Place of Business

3921 S.W. 47 Ave.

Suite, Apt. #, etc.
#1012

City & State
DAVIE, FL

Zip
33314

Country

Broward

3. Mailing Address

3921 S.W. 47 Ave.

Suite, Apt. #, etc.
#1012

City & State
DAVIE, FL

Zip

33314

Country

Broward

6. Name and Address of Current Registered Agent

ENGLANDER, JOLENE
10541 SW 127TH CT
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1650 S.E. 7 ST.

Fort Lauderdale

City

FL

Zip Code

33316

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 *Jolene Englander*

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

(NOTE: Registered Agent signature required when reinstating)

1-7-02

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

TITLE P
NAME MORAN, JAMES H
STREET ADDRESS 9821 FAIRWAY COVE LANE
CITY-ST-ZIP PLANTATION FL 33324 ☐ Delete

TITLE ST
NAME ENGLANDER, JOLENE A
STREET ADDRESS 10541 S.W. 127TH COURT
CITY-ST-ZIP MIAMI FL 33186 ☐ Delete

TITLE V
NAME MORAN, JOSEPH
STREET ADDRESS 9821 FAIRWAY COVE LN
CITY-ST-ZIP PLANTATION FL 33324 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
STREET ADDRESS 1650 S.E. 7 ST.
CITY-ST-ZIP Fort Lauderdale, FL 33316 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 16915 Crestview Ln.
CITY-ST-ZIP Weston, FL 33326 ☒ Change ☐ Addition

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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: *Jolene Englander*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-02

954-585-6195

Date

Daytime Phone #

FILED
Jan 10, 2002 8:00 am
Secretary of State

01-10-2002 90014 017 ***150.00

80001634



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2171261 ☐ Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

0320544 AV

CR2E034 (9/01)