

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 08, 2002 8:00 am
Secretary of State

07-08-2002 90230 002 ***150.00

DOCUMENT # G93966

1. Entity Name
J.D. SALES, INC.

Principal Place of Business

**4800 NE 27TH AVE
FORT LAUDERDALE FL 33308**

Mailing Address

**4800 NE 27TH AVE
FORT LAUDERDALE FL 33308**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2384955

Applied For
Not Applicable

Zip

Country

Zip

Country

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

DEMARS, JAMES

4800 NE 27TH AVE

FORT LAUDERDALE FL 33308

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **DEMARS, JAMES**
STREET ADDRESS **4800 NE 27TH AVE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

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

TITLE SD ☐ Delete
NAME **DEMARS, CHARLOTTE**
STREET ADDRESS **4800 NE 27TH AVE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-2-02 954-772-4490

CR2E034 (4/02)

Attachment

693966
119299

J.D. Sales
4800 NE 27th Avenue
Fort Lauderdale, FL 33308-4821

TO: FLORIDA DEPT. OF STATE
DIVISION OF CORPORATIONS

Dear Sirs:

Enclosed is my check #2566 for filing
the 2002 UNIFORM BUSINESS REPORT #693966.

UNFORTUNATELY I NEVER RECEIVED ANY
PREVIOUS NOTICE & I beg you to forgive me
and not charge me with a late fee. I
was surprised when my tax man said that
I should have RECEIVED THIS NOTICE EARLIER
IN THE YEAR. I WOULD HAVE CERTAINLY PAID
IT THEN AS I HAVE EACH OF MY CORPORATE YEARS
IN FLORIDA.

Please be so kind to accept this apology.

Sincerely

Jim Demars