FILED
May 16, 2002 8:00 am
Secretary of State
05-16-2002 90049 040 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) 2002

DOCUMENT # J04423

1. Entity Name
JBH DISTRIBUTION SYSTEMS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5360 SW 9th St.	5360 SW 9th St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Plantation, FL	City & State: Plantation, FL
Zip: 33317 Country: USA	Zip: 33317 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-2713105 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Jeffrey B. Hopkins

Street Address (P.O. Box Number is Not Acceptable): 5360 SW 9th St.

City: Plantation FL Zip Code: 33317

6. 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: _____ 4-30-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when not listed) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
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	PD
NAME	Hopkins. Jeffrey B.
STREET ADDRESS	5360 SW 9th St.
CITY-ST-ZIP	Plantation, FL 33317

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

CR2E034S (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Jeffrey B. Hopkins 4-30-02 954-605-6062
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #