## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)**

J30052 **DOCUMENT #** 



**FILED** Apr 24, 2003 8:00 am Secretary of State

J.A.S.S. MORTGAGE & REALTY CO., INC.								04-24-2003 90150 006 ***150.00				
Principal Place of Business 3500 SW 121 AVE DAVIE FL 33330 US		3500	Mailing Address 3500 SW 121 AVE DAVIE FL 33330 US									
2. Principal Place of Business		<b>3.</b> Ma	3. Mailing Address				I (BESTION AND CONTRACTOR OF STATE AND					
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State	e _ ·	City	& State				4. FE	El Number 59-27072	54		Applied For Not Applicable	]
Zip	Country	Zip		Cour	itry		<b>5.</b> Ce	ertificate of Status Desired	ı 🗆	\$8.75 A Fee Requi		
	6. Name and Address of Curre	nt Register	Registered Agent			7. Name and Address of New Registered Agent						1
					Name	1	(	Λ		_		7
HURLEY,			<u> </u>		rley, HRTHUR J					4		
4601 SW						Street Address (P.O. Box Number is Not Acceptable)						
	ERDALE FL 33330				- 50	00		<u> </u>				1
FI. LAUD	ERDALE PL 33330											
					CITY	۱۱ ن۹	_		F	FL Zig-Cg	ode 3330	
	named entity submits this statement ions of registered agent.	for the purp	pose of changing its	register				nt, or both, in the State of	Florida. I a			1
SIGNATURE											·	
JIGIVATORE .	Signature, typed or printed name of registered age	ent and title if app	olicable. (NOTE	: Registere	d Agent signat	ure required v	when rein	nstating)	DAT	E		
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.0 Payable to Florida Department							9. Election Campaign Trust Fund Contribu			.00 May Be ed to Fees	
10.	OFFICERS AN	ID DIRECTO	)RS	11.			ADD	DITIONS/CHANGES TO C	FFICERS A	ND DIRECTO	RS IN 11	1.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Hurley, Arthur J. 4601 SW 128TH AVE. Davie Fl		☐ Delete	1		70 1tus	2.£	Arethur 121 ANE		Change	Addition	(CO/OF) 850
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NAME	HURLEY, SUSAN M.			NAM	ET ADDRESS	HUE		4 , 905 ans 1/	,,,,,			
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12. 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 of true and accurage 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 russee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment wit

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

**SIGNATURE:** 

STREET ADDRESS CITY-ST-ZIP

NAME

☐ Delete

7400

☐ Change

☐ Addition