

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # J67341**

1. Entity Name

B.A.J. MANAGEMENT, INC.**FILED**
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90078 014 ***150.00

Principal Place of Business

2100 CONSTITUTION BLVD.
STE. 171
SARASOTA FL 34231
US

Mailing Address

2100 CONSTITUTION BLVD.
STE. 171
SARASOTA FL 34231-4146
US

2. Principal Place of Business

4420 VIOLET AVE

3. Mailing Address

4420 VIOLET AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

SARASOTA, FL

4. FEI Number

59-2797271

Applied For

Not Applicable

Zip

Country

34233**SARASOTA**

Zip

Country

34233**SARASOTA**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

STEINBERG, HERMAN
2100 CONSTITUTION BLVD.
SUITE 120
SARASOTA FL 34231

Name

SAME

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

4420 VIOLET AVENUE

City

SARASOTA

FL

Zip Code

34233

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

HERMAN STEINBERG, PRESIDENT

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

3/20/00

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	STEINBERG, HERMAN	4420 VIOLET AVENUE	SARASOTA FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 687, 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:

HERMAN B. STEINBERG
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/20/00

Daytime Phone #

941-923-9867

CR2E034 (9/99)