

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90433 047 ***150.00

DOCUMENT # *K07668*

1. Entity Name

Jac-mo, Inc

DO NOT WRITE IN THIS SPACE

636310

2. Principal Place of Business

7035 W Camino Real

3. Mailing Address

11278 Edgewater Cir

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

Wellington FL

4. FEI Number

65-0018415

Applied For

Not Applicable

Zip

33433

Country

Palm Bch.

Zip

33414

Country

Palm Bch.

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

Richard C Skamel Jr.

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

212 N Federal Hwy.

City

Deerfield Bch

FL

Zip Code

33441

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

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) ☐

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
NAME
STREET ADDRESS
CITY-ST-ZIP
Jack moore stock holder
11278 Edgewater Cir
Wellington FL 33414

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Phyllis A moore President
11278 Edgewater Cir
Wellington FL 33414

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Scott mc millan U.P.
3912 NW 25th way
Boca Raton FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Theresa mc millan Treas.
3912 NW 25th way
Boca Raton FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

Phyllis A moore

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Phyllis A moore 4/10/02

Date

Daytime Phone #

561 3937009

CR2E034B (12/01)