

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K83003

1. Entity Name

J TIE INC.

FILED
Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90046 037 ***150.00

Principal Place of Business

2800 W OAKLAND PARK BLVD
STE 109
FT LAUDERDALE FL 33311
US

Mailing Address

2800 W OAKLAND PARK BLVD
STE 109
FT LAUDERDALE FL 33311
US

2. Principal Place of Business

PO Box 8688

3. Mailing Address

PO Box 8688

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Deerfield Beach FL

City & State

Deerfield Beach FL

Zip

33443

Country

Zip

33443

Country

4. FEI Number

65-0116370

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

APTER, MICHAEL
2800 W OAKLAND PARK BLVD
STE 109
FT LAUDERDALE FL 33311

7. Name and Address of New Registered Agent

Name

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

691 SOUTH FEDERAL HWY

City

Deerfield Beach

FL

Zip Code

33443

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]

MICHAEL APTER PRES

4/10/01

(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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

TITLE D
NAME APTER, MICHAEL
STREET ADDRESS 2800 W OAKLAND PARK BLVD #109
CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete

TITLE D
NAME APTER, CHRISTINE
STREET ADDRESS 2800 W OAKLAND PARK BLVD STE 109
CITY-ST-ZIP LAUDERHILL FL 33311 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 691 S. FEDERAL HWY
CITY-ST-ZIP DEERFIELD BEACH FL 33443 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 691 S. FEDERAL HWY
CITY-ST-ZIP DEERFIELD BEACH FL 33443 ☒ Change ☐ Addition

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

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

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

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

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Apter

4/10/01

9544802666

Date Daytime Phone #

CR2E034 (10/00)