

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L76593

1. Entity Name

A & J DISTRIBUTING CORPORATION

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90130 015 ***150.00

Principal Place of Business

Mailing Address

6229 72 AV NORTH
 PINELLAS PARK FL 33781
 US

6229 72 AVE NORTH
 PINELLAS PARK FL 33781-4228
 US

2. Principal Place of Business

3. Mailing Address

5430 70 AV N

5430 70 AV N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

BLDG #1

BLDG #1

City & State

City & State

PINELLAS PARK FL

PINELLAS PARK, FL

Zip

Country

Zip

Country

33781

USA

33781

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3015354

Applied For

Not Applicable

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

RUBEN, A J
 6544 59TH COURT N
 PINELLAS PARK FL 33781

Name

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

City

FL

Zip Code

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
 NAME RUBEN, A. JEFF
 STREET ADDRESS 6229 72 AV N
 CITY-ST-ZIP PINELLAS PARK FL

TITLE P ☒ Change ☐ Addition
 NAME RUBEN, A. JEFF
 STREET ADDRESS 5430 70 AV N
 CITY-ST-ZIP PINELLAS PARK, FL 33781

TITLE VP ☐ Delete
 NAME RUBEN, ANNE E.
 STREET ADDRESS 6229 72 AVE N
 CITY-ST-ZIP PINELLAS PARK FL

TITLE VP ☒ Change ☐ Addition
 NAME RUBEN, ANNE E.
 STREET ADDRESS 5430 70 AV N
 CITY-ST-ZIP PINELLAS PARK, FL 33781

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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 CITY-ST-ZIP

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

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:

Anne E. Ruben
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date *(727) 522-5450*
 Daytime Phone #

CR2E034 (9/99)