

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90015 047 ***150.00

DOCUMENT # L82175

1. Entity Name

JORCAST, INC.

Principal Place of Business

~~JORGE E. CASTILLO~~
~~1921 N. 50 AVENUE~~
~~HOLLYWOOD FL 33021-4015~~

Mailing Address

~~JORGE E. CASTILLO~~
~~1921 N. 50 AVENUE~~
~~HOLLYWOOD FL 33021-4015~~

1921 N.W. 74TH AVE. PEMBROKE PINES
FL. 33024

2. Principal Place of Business

1921 N.W. 74TH AVE.

3. Mailing Address

1921 N.W. 74TH AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PEMBROKE PINES, FL.

City & State

PEMBROKE PINES, FL.

Zip

33024

Country

BROWARD

Zip

33024

Country

BROWARD

4. FEI Number 65-0220830

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CASTILLO, JORGE E.
1921 N. 50 AVENUE
HOLLYWOOD FL 33021-4015
1921 N.W. 74TH AVE.
PEMBROKE PINES, FL. 33024

7. Name and Address of New Registered Agent

Name
JORGE CASTILLO
Street Address (P.O. Box Number is Not Acceptable)
1921 N.W. 74TH AVE.
City
PEMBROKE PINES, FL
Zip Code
33024

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

4-20-2001

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CASTILLO, JORGE E.
1921 N. 50 AVE. 1921 N.W. 74TH AVE
HOLLYWOOD FL PEMBROKE PINES, 33024

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CASTILLO, ELENA L.
1921 N. 50 AVE. SAME
HOLLYWOOD FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JORGE CASTILLO 4-20-2001
ELENA L. CASTILLO ELENA CASTILLO

CR2E034 (10/00)