

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2001 8:00 am
Secretary of State

07-31-2001 90231 019 ***150.00

0083896
AV

DOCUMENT # L90825

1. Entity Name

JAY'S FOOD BROKERAGE, NC.

Principal Place of Business

**1603 LARK LANE
BRANDON FL 33510**

Mailing Address

**1603 LARK LANE
BRANDON FL 33510**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3023116

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

80061160



~~6. Name and Address of Current Registered Agent~~

~~7. Name and Address of New Registered Agent~~

**GROGAN, JOHN D.
1603 LARK LANE
BRANDON FL 33510**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **PD** ☐ Delete
NAME **GROGAN, JOHN D.**
STREET ADDRESS **1603 LARK LANE**
CITY-ST-ZIP **BRANDON FL**

TITLE **STD** ☐ Delete
NAME **GROGAN, BETTY J.**
STREET ADDRESS **1603 LARK LANE**
CITY-ST-ZIP **BRANDON FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE
John D. Grogan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/01
Date

813-689-9338
Daytime Phone #

CR2E034 (5/01)

Attachment # L90825
80001100

7-24-01

Dept of State
Division of Corporations
Tallahassee, FL

Dear Sirs

Regarding your uniform business
Report Document # L90825.

Received this report the last of
June, and took it over to
my accountant today along
with all material for my
year end Corporate Federal Taxes.

My accountant stated this was
over due, that I should have
received one the first part of
this year.

I did not receive one the first
part of this year. I take everything
over to my accountant for him
to work up for me.

Attachment # ~~290825~~
B0601160

I called your office today and
talked to 'Christy' at approximately
4:40 P.M.

Christy said to fill out report
and send a check for 150⁰⁰
along with a letter stating
I did not receive one the
first part of this year. Your
dept. would review my letter
and advise if there was to
be a additional charge.

I'm very sorry about this
situation and handle documents
with my accountant when I
receive them.

Thanks for your Consideration
John D. Sugar
Gays Food Brokerage