

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L98000000521**

1. Entity Name

STRATEGIC ALLIANCE TECHNOLOGIES, L.L.C.

Principal Place of Business

8551 W. SUNRISE BLVD., #102
PLANTATION FL 33322-4007

Mailing Address

8551 W. SUNRISE BLVD., #102
PLANTATION FL 33322-4007

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

65-0828416

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JUMPING JAX TAX, INC. - JUMPINGJAXTAX.COM, INC.

8551 W. SUNRISE BLVD., #102
PLANTATION FL 33322-4007

Name

JUMPINGJAXTAX.COM, INC.

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

8551 WEST SUNRISE BLVD., #102

City

PLANTATION

FL

Zip Code

33322-4007

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.

CEO of Jumping Jax Tax, Inc.

4/10/2000

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
NAME **MGRM**
STREET ADDRESS **JUMPING JAX TAX, INC.**
CITY-ST-ZIP **8551 W. SUNRISE BLVD., #102
PLANTATION FL 33322-4007**

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

TITLE ☐ Delete
NAME **MGRM**
STREET ADDRESS **M.S. COMPUTERS, INC.**
CITY-ST-ZIP **8551 W. SUNRISE BLVD., #102
PLANTATION FL 33322-4007**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE: John S. Miller, CEO of Jumping Jax Tax, Inc.

Date

Daytime Phone #

APPROVED
AND
FILED

00 APR 22 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

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