CR2E083 (10/02)

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

CLEARWATER FL 33762

13790-B 49TH STREET NORTH

DOCUMENT # L99000002747

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

MANAGING MEMBERS/MANAGERS

1. Entity Name JISH, LLC

Principal Place of Business

13790-B 49TH STREET NORTH

2. Principal Place of Business

MORTON, JAMES E

the obligations of registered agent.

MGR

MORTON, JAMES E

CLEARWATER FL 33762

13790-B 49TH STREET NORTH

CLEARWATER FL 33762

13790-B 49TH STREET NORTH

CLEARWATER FL 33762

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

TITLE

TITLE

NAME

9.



Country

Name

City

FILE NOW!!! FEE IS \$50.00

Due By May 1, 2003

10.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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.

CITY-ST-ZIP

CITY-ST-ZIF

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

☐ Delete

☐ Delete

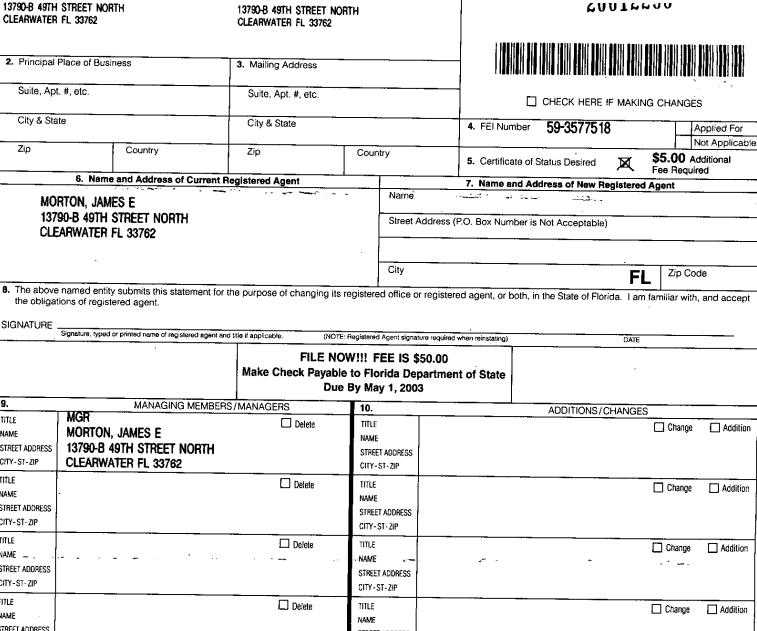
☐ Delete

☐ Delete

☐ Delete

FILED Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90313 013 ****55.00



☐ Change

☐ Change

Daytime Phone #

Date

☐ Addition

☐ Addition