2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003
Secretary of State

DOCUMENT# M01000001358

Entity Name: JAX REMAN, L.L.C.

Current Principal Place of Business:

8601 YOUNGERMAN CT.
JACKSONVILLE, FL 322446628

New Principal Place of Business:

Current Mailing Address:

8601 YOUNGERMAN CT.
JACKSONVILLE, FL 322446628

New Mailing Address:

FEI Number: 59-3724934 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	SUPHACHINDA, ART	
Address:	8601 YOUNGERMAN CT	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	MGR	( ) Delete
Name:	DONOVAN, BILL	
Address:	8601 YOUNGERMAN CT	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	MGR	( ) Delete
Name:	MARTIN, LLOYD	
Address:	8601 YOUNGERMAN CT	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	MGR	( ) Delete
Name:	NEWMAN, BRUCE	
Address:	8601 YOUNGERMAN CT	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	MGR	( ) Delete
Name:	BOUTWELL, MICHELE	
Address:	8601 YOUNGERMAN CT	
City-St-Zip:	JACKSONVILLE, FL 32244	
Title:	MGR	(X) Delete
Name:	TAKAHASHI, SATOSHI	
Address:	8601 YOUNGERMAN CT	
City-St-Zip:	JACKSONVILLE, FL 32244	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: ART SUPHACHINDA MGR 01/13/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date