## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

## **DOCUMENT #**

M56167

1. Entity Name

JUPITER FARMS, INC.



## **FILED** Mar 04, 2003 8:00 am Secretary of State

03-04-2003 90066 010 \*\*\*150.00

			6				
Principal Place of Business % ERNEST M. HAŁPRYN 1428 BRICKELL.STE.105 MIAMI FL 33131 US		Mailing Address % ERNEST M. HALPRYN 1428 BRICKELL,STE.105 MIAMI FL 33131 US			ian nigilaran aran ar	11 <b>0.0</b> 11 0.011 1801	
2. Principal Place of Business		3. Mailing Address		<u>.</u> 			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 59-2832647 Applied For		
Zip	Country	Zip	Country		5. Certificate of Status Desired	□ \$8.75 A	
	6. Name and Address of Current R	egistered Agent			7. Name and Address of New Regis	Fee Requir	ed
HALPRYN, ERNEST M			Na	ame			···
	RICKELL AVENUE #105	Street Address (		P.O. Box Number is Not Acceptable)			
	L 33131-0433						
IAIN-MAIL I	£ 35 15 1-0455						
<u> </u>	•		Cit	у	, , , , , , , , , , , , , , , , , , ,	FL Zip Cod	de
8. The abov	e named entity submits this statement for tations of registered agent.	he purpose of changing i	its registered offi	ice or registere	ed agent, or both, in the State of Florida	Lam familiar with	and against
the obliga	ations of registered agent.			Ť	Section 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	. Turriaring with	, and accept
SIGNATURE							I
<del></del>	Signature, typed or printed name of registered agent and	title if applicable. (NC	OTE: Registered Agent	signature required w	when reinstating)	DATE	<del></del>
1a [	FILE NOW!!! FEE IS \$150.00				O Clastics Communication		
Make Chec	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of S	State			<ol> <li>Election Campaign Financi</li> <li>Trust Fund Contribution.</li> </ol>	~ _ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	00 May Be d to Fees
10.	OFFICERS AND DI	RECTORS	11,		ADDITIONS/CHANGES TO OFFICER	C AND DIDECTOR	
TITLE	PD NAI PRIVAL EDITOR	☐ Delete	TITLE		ABBITTONO/OHANGES TO OFFICER	Change	S IN 11 Addition
NAME STREET ADDRESS	HALPRYN, ERNEST 1428 BRICKELL #105		NAME			Onlinge	L] Addition
CITY-ST-ZIP	MIAMI FL		STREET ADDR				
TITLE	VPD		CITY-ST-ZIP				
NAME	WEISBERG, ALAN JAY	☐ Delete	TITLE NAME			Change	☐ Addition
STREET ADDRESS	1428 BRICKELL #105		STREET ADDR	ESS			
CITY-ST-ZIP	MIAMI FL		CITY-ST-ZIP	·			
TITLE NAME	VPD	☐ Delete	TITLE			☐ Change	☐ Addition
STREET ADDRESS	DEVECCHI, JOHN 1428 BRICKELL AVE., STE. 105		NAME				
CITY-ST-ZIP	MIAMI FL		STREET ADDR	ESS			
TITLE	TD	□ Delete	TITLE	<del>-  </del>	· · · · · · · · · · · · · · · · · · ·		
NAME	LABIANCA, PHILIP	builte	NAME			Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	1428 BRICKELL AVE., STE. 105		STREET ADDRE	ESS			
TITLE	MIAMI FL S		CITY-ST-ZIP		<del></del>		}
NAME	HOERNER, JUDITH A	☐ Delete	TITLE	-		☐ Change	☐ Addition
STREET ADDRESS	1428 BRICKELL AV STE 105		NAME Street addre	ess			
CITY-ST-ZIP	MIAMI FL		CITY-ST-ZIP				1
TITLE		☐ Delete	TITLE	<u> </u>		☐ Change	Addition
NAME STREET ADDRESS			NAME	.		onango	reduction
CITY-ST-ZIP			STREET ADDRES	SS			}

12. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

URE REQUIET est M. Halpryn, President

February 24, 2003

Daytime Phone #