2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 03, 2002 8:00 am E Secretary of State DOCUMENT # M84982 1. Entity Name TRIPLE J. AND S., INC. 03-03-2002 90092 034 ***150.00 Principal Place of Business Mailing Address 745511 7901 W. BROWARD BOULEVARD 7901 W. BROWARD BOULEVARD PLANTATION FL 33324 PLANTATION FL 33324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0056520 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TATUM, THOMAS R. Street Address (P.O. Box Number is Not Acceptable) 200 E LAS OLAS BLVD #1900 FT LAUDERDALE FL 33301 City Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Change CR2E034 (9/01 ☐ Addition TITLE ☐ Delete TITLE NAME NAME RUDOLPH, JOHN R. STREET ADDRESS STREET ADDRESS 7901 W BROWARD BLVD CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL . Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME RUDOLPH, SHARON M. STREET ADDRESS 7901 W BROWARD BLVD STREET ADDRESS CJTY-ST-7IP CITY-ST-ZIP FT LAUDERDALE FL Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 true 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 adddess, with all pther like empowered.

OF SIGNING OFFICER OR DIRECTOR

FILED

BRINKLEY, MCNERNEY, MORGAN, SOLOMON & TATUM, LLP

ATTORNEYS AT LAW

19TH FLOOR

SUN-SENTINEL BUILDING

200 EAST LAS OLAS BOULEVARD

W. MICHAEL BRINKLEY
WILLIAM T. COLEMANO
KEVIN P. CROSBY **
DAVID F. HANLEY
KENNETH J. JOYCE
KENNETH E. KEECHL
DONALD J. LUNNY, JR.
MICHAEL J. MCNERNEY +
PHILIP J. MORGAN *
DANIEL P. J. O'CONNOR
HARRIS K. SOLOMON +
ROBERTA G. STANLEY ++
THOMAS R. TATUM

TELEPHONE (954) 522-2200 FACSIMILE (954) 522-9123 e-mail: lawfirm@brinkleymcnerney.com

FORT LAUDERDALE, FLORIDA 33301-2209

MAILING ADDRESS:
POST OFFICE BOX 522
FORT LAUDERDALE, FLORIDA 33302 - 0522

JOHN R. TATUM

(1926-1995)

EARL F. FECHTER
LOUIS R. GIGLIOTTI
KENNETH A. GORDON
JEFFREY S. KURTZ
JOHN N. LAMBROS
MARK A. LEVY
JULIETTE E. LIPPMAN
BRENDAN B. O'BRIEN
JONATHAN M. STREISFELD

SCOTT P. CHITOFF

+ BOARD CERTIFIED BUSINESS LITIGATION LAWYER * BOARD CERTIFIED REAL ESTATE LAWYER

++ BOARD CERTIFIED MARITAL AND FAMILY LAWYER

** REGISTERED PATENT ATTORNEY

O BOARD CERTIFIED CITY, COUNTY &

LOCAL GOVERNMENT LAWYER

DBOARD CERTIFIED TAX LAWYER

February 15, 2002

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P O BOX 1500 TALLAHASSEE FL 32302-1500

Re: Triple J. and S., Inc.

Dear Sir or Madam; commencer system was remained as the market.

Enclosed for filing please find an executed 2002 Uniform Business Report for the above referenced corporation, together with a check in the amount of \$150.00 representing the filing fee due.

Should there be any questions regarding the above, please do not hesitate to contact me. Thank you for your attention to this matter.

Very truly yours,

DAVID F. HANLEY

DFH:dh Enclosures

cc: Triple J. and S., Inc.

A Company

Via Certified Mail: 7099 3220 0002 9461 4743

Return Receipt Requested

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