

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000004598

1. Entity Name

DA'J UNLIMITED, INC.

FILED

Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90096 038 ****61.25

Principal Place of Business

517 NW 16TH AVENUE
FORT LAUDERDALE FL 33311

Mailing Address

517 NW 16TH AVENUE
FORT LAUDERDALE FL 33311

B0017463



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1025309

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MATHIS, PHYLLIS
517 NW 16TH AVENUE
FORT LAUDERDALE FL 33311

Name

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

City

FL

Zip Code

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)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME PD
STREET ADDRESS MATHIS, PHYLLIS
CITY-ST-ZIP 517 NW 16TH AVENUE
FORT LAUDERDALE FL 33311 ☐ Delete

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

TITLE
NAME SD
STREET ADDRESS HAWKINS, WINFRED
CITY-ST-ZIP 3540 NW 58TH AVE #K316
LAUDERDALE LAKES FL 33319 ☐ Delete

TITLE
NAME ☒ Change ☐ Addition
STREET ADDRESS HAWKINS, WINFRED
CITY-ST-ZIP 516 NW 16th AVENUE
FT. LAUDERDALE, FL. 33311

TITLE
NAME TD
STREET ADDRESS WATTS, CHESTER
CITY-ST-ZIP 3651 NW 8TH PLACE
FORT LAUDERDALE FL 33311 ☐ Delete

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

TITLE
NAME D
STREET ADDRESS ROBINSON, DANIEL
CITY-ST-ZIP 1251 NW 46TH AVENUE
FORT LAUDERDALE FL 33313 ☐ Delete

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

TITLE
NAME T
STREET ADDRESS BOUIE, ANN
CITY-ST-ZIP 520 NW 16TH AVENUE
FORT LAUDERDALE FL 33311 ☒ Delete

TITLE
NAME ☐ Change ☒ Addition
STREET ADDRESS ST. LOUIS, SA'RA M.
CITY-ST-ZIP 516 NW 15th TERRACE #2
FORT LAUDERDALE, FL. 33311

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

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 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Phyllis R. Mathis 1/17/02 (954)467-3229

Date

Daytime Phone #

CR2E037 (9/01)