

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000007147

1. Entity Name

MAXIMUM CONNECTIONS ONE LOVE INCORPORATED

Principal Place of Business

4479 PHILLIP HWY LOT 139
JACKSONVILLE FL 32207

Mailing Address

4479 PHILLIP HWY LOT 139
JACKSONVILLE FL 32207

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JORDAN, SHERIE L
4479 PHILLIP HWY LOT 139
JACKSONVILLE FL 32207

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
STREET ADDRESS
CITY-ST-ZIP
POCE
JORDAN, SHERIE
4479 PHILLIP HWY LOT 139
JACKSONVILLE FL 32207 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
Paul E Howard
2433 Auto Scot Blvd D.
JACKSONVILLE FL 32207

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete
ANWAR HARRIS
990 Broward Rd #43
Jacksonville FL 32218

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
ELVIS D. JONES
3940 N.W. 96 St
Miami, FL 33147

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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

Date

Daytime Phone

FILED
Jul 01, 2002 8:00 am
Secretary of State

05-28-2002 90719 036 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)

03/17/02 954-925-5286

Attachment

#NO1000007147/37031 May 6, 2002

To Whom it may concern:
I Sherri Jordan CEO of
Maximum Connection One Love Rec.
is late in paying fee of \$61.25
due to changing residents.
My document was locked in
storage and I was unable
to retrieve them in time
to be able to pay on May 1, 2001.
Please except my payment.

Thank you
Sherri Jordan