

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90029 013 ****61.25

DOCUMENT # N96000004290

1. Entity Name

A FAMILY AFFAIR BY JESSIE, INC.

Principal Place of Business

3301 NW 23RD ST
 LAUDERDALE LKS. FL 33311

Mailing Address

3301 NW 23RD ST
 LAUDERDALE LKS. FL 33311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0695135

Applied For

Not Applicable

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

SHELTON, MARYE
3301 NW 23RD ST
LAUDERHILL 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 **DN** ☐ Delete
 NAME **MCLEMORE, JOANN**
 STREET ADDRESS **2531 NW 11 ST**
 CITY-ST-ZIP **POMPANO BEACH FL**

TITLE **D/S** ☐ Change ☒ Addition
 NAME **Dorothy Matthews**
 STREET ADDRESS **4940 N.W. 18 Street**
 CITY-ST-ZIP **Fort Lauderdale, Fla. 33313**

TITLE **DS** ☒ Delete
 NAME **THOMPSON, LISA**
 STREET ADDRESS **4043 NW 16TH ST**
 CITY-ST-ZIP **LAUDERHILL FL 33313**

TITLE **D/S** ☐ Change ☒ Addition
 NAME **Carolyn Terry**
 STREET ADDRESS **1810 N.W. 28 Avenue**
 CITY-ST-ZIP **Fort Lauderdale, Fla. 33311**

TITLE **DT** ☐ Delete
 NAME **CUMMINGS, JENNIFER**
 STREET ADDRESS **1741 NW 27TH TER**
 CITY-ST-ZIP **FT LAUDERDALE FL 33311**

TITLE **DIV** ☐ Change ☒ Addition
 NAME **Clester E. Matthews**
 STREET ADDRESS **4940 N.W. 18 Street**
 CITY-ST-ZIP **Fort Lauderdale, Fla. 33313**

TITLE **D** ☒ Delete
 NAME **SUTTON, LINDA**
 STREET ADDRESS **1810 NW 28TH AVE**
 CITY-ST-ZIP **FT LAUDERDALE FL 33311**

TITLE **P/M/C** ☒ Change ☐ Addition
 NAME **Marye Shelton**
 STREET ADDRESS **3301 N.W. 23 St.**
 CITY-ST-ZIP **Lauderdale Lakes, Fla. 33311**

TITLE **PDC** ☐ Delete
 NAME **SHELTON, MARYE**
 STREET ADDRESS **3301 NW 23 ST**
 CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

TITLE ☐ Change ☒ Addition
 NAME **Taaj Shelton**
 STREET ADDRESS **2475 Nugget Lane**
 CITY-ST-ZIP **Tallahassee, Fla. 3230**

TITLE **D** ☒ Delete
 NAME **MONCRIEF, STEPHANIE**
 STREET ADDRESS **1751 NW 27TH TERR**
 CITY-ST-ZIP **FT LAUDERDALE FL 33311**

TITLE ☐ Change ☒ Addition
 NAME **Jae Jones**
 STREET ADDRESS **1741 N.W. 27 Terrace**
 CITY-ST-ZIP **Ft Land, Fla. 33311**

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: Marye Shelton Marye Shelton 4/2/02 (954) 731-0608

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)