

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2002 8:00 am
Secretary of State

08-14-2002 90023 008 ***550.00

DOCUMENT # P00000016447

1. Entity Name

J.B. INSOFTE CUSTOM BUILDERS, INC.

Principal Place of Business

5627 19 AVENUE NORTH
 ST. PETERSBURG FL 33710

Mailing Address

5627 19 AVENUE NORTH
 ST. PETERSBURG FL 33710

2. Principal Place of Business

8009 13 Ave So.

3. Mailing Address

8009 13 Ave So

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

4. FEI Number

59-3640775

Applied For

Not Applicable

Zip

33707

Country

USA

Zip

33707

Country

USA

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

INSOFT, JOHN
 5627 19 AVENUE NORTH
 ST. PETERSBURG FL 33710

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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

John Insoft John Insoft

8/12/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
 NAME INSOFT, JOHN B
 STREET ADDRESS 5627 19 AVENUE NORTH
 CITY-ST-ZIP SAINT PETERSBURG FL 33710

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

TITLE VP ☐ Delete
 NAME INSOFT, JOHN B
 STREET ADDRESS 5627 19 AVENUE NORTH
 CITY-ST-ZIP SAINT PETERSBURG FL 33710

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

TITLE S ☐ Delete
 NAME INSOFT, JOHN B
 STREET ADDRESS 5627 19 AVENUE NORTH
 CITY-ST-ZIP SAINT PETERSBURG FL 33710

TITLE S ☒ Change ☐ Addition
 NAME MELISSA J. INSOFTE
 STREET ADDRESS 8009 13 Ave S.
 CITY-ST-ZIP ST. PETERSBURG, FL 33707

TITLE T ☐ Delete
 NAME INSOFT, JOHN B
 STREET ADDRESS 5627 19 AVENUE NORTH
 CITY-ST-ZIP SAINT PETERSBURG FL 33710

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 trustee 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 address, with all other like empowered.

SIGNATURE:

John Insoft SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/12/02 (727)344-5646

CR2E034 (4/02)