FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT# POODOOD 16770 03 FEB 18 PM 3: 17 JORDAN REECE ENTERPRISES INC. SECRETARY OF STATE: TALLAHASSEF, FLORIDA. DO NOT WRITE IN THIS SPACE 750 116 2. Principal Place of Business 3. Mailing Address 130 MARK DAVID BLUD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number .A SSEL BERRY Applied For Not Applicable Country 5. Certificate of Status Desired \$8.75 Additional 7. Name and Address of Current Registered Agent DEBORAH A. TURNER DO NOT WRITE IN THIS SPACE JAYMONT LAKE MARY 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 **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 9. Election Campaign Financing Amended UBR is \$61.25 \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE VP VALERIE JORDAN REECE TITLE NAME CR2E034B (12/02) 130 MARK DAVID BLVD. NAME 7: STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CASSELBERRY FL 32707-5411 CITY-ST-ZIP TITLE NAME 800012975738 02/24/03--01006--016 **300.00 PETER A. REECE 130 MARK DAVID BLUD CASSELBERRY, FL 32707-5 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 4.29 TITLÉ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 supplied that 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 attachment with an address, with all other like empowered.

ps 2/19

Devtime Phone #

FOR PROFIT CORPORATION

	UNIFORM BUSINE		(UBR)	
i i	DOCUMENT # POODOOD 16770 1. Entity Name JORDAN. REECE ENTERPRISES INC			
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DO NOT WRITE IN THIS SPACE				
Principal Place of Business 3. Mailing Address				
Suite, Apt. #, etc. Suite, Apt. #, etc.			<u> </u>	DO NOT WRITE IN THIS SPACE
City & St	Sity & State City & State			6.5
Cass	CASSELBERRY FL			4. FEI Number Applied For Not Applied For Not Applied For
Zip 32	2707-54/6 Country	Zip 'i (Country	Certificate of Status Desired
			Name N _	7. Name and Address of Current Registered Agent
	DO NOT WRITE			30RAH A. TURNER. (P.O. Box Number is Not Acceptable)
IN THIS SPACE				WAYMONT COURT, SUITE 101
å.			City	to a constant
8. The abov	e named entity submits this statement for t	the number of changing its regi	City LAKE	FL 30 Code 3 Cod
the obliga	ations of registered agent.	ne parpose or changing its regi	stered office or registe	
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(Ja	nuary 1 - May 1 Fee Is \$150.00	Title if applicable. (NOTE: Reg	istered Agent signature required	
. 6 . Haka Chasi	After May 1, Fee is \$550.00 Amended UBR is \$61.25			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
10.	k Payable to Florida Department of S OFFICERS'AND DI		e Maria	
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CITY-ST-ZIP	CASSELBERRY, FL 3	7	CITY-ST-ZIP	
NAME	PETER A. REECE		TITLE	
STREET ADORESS CITY-ST-ZIP	130 MARK DAVID CASSELBERRY, FL		STREET ADORESS CITY-ST-ZIP	
TITLE			TITLE	·
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12. Thereby c	ertify that the information supplied with this	filing days had so the form	Xemption stated in Sec	ction 119 07(3Vi) Florida Statutes I further conflict that the inference
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 607, Florida Statutes; and that my name appears in Block 10 or on an analysis of the like empowered.				
SIGNATURE 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
SIGNATURE: SIGNATURE AND TYPED OR PRINTED MANK OF SIGNING OFFICER OR DIRECTOR				

Affachment

P00000016770



JORDAN REECE ENTERPRISES INC.

Telephone (407) 331-0212

130 MARK DAVID BOULEVARD CASSELBERRY, FLORIDA 32707-5416

February 11, 2002

Division of Corporations P. O. Box 1500 Tallahassee, Florida 32302-1500

This letter is to inform you of the reason why the 2002 UBR fee was not paid for Jordan Reece Enterprises Inc.

As of October 2001, the company's address was changed from 5701 Gatlin Avenue, #122, Orlando, Florida 32822 to 130 Mark David Boulevard, Casselberry, Florida 32707.

No Uniform Business Report (UBR) Renewal Form for 2002 was forwarded or received at the new and current mailing address. Also, please be advised that the UBR Renewal Form for 2003 has not been received either.

Enclosed are completed UBR Forms and a check in the amount of \$300.00 for the 2002 and 2003 renewals.

Your assistance with reactivating the corporation is greatly appreciated.

Thank you,

Peter A. Reece