

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90047 027 ***158.75

DOCUMENT # *P00000028914*

1. Entity Name

JT's Take Out, Inc. ✓



90100710

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

655 NW 22 Road

3. Mailing Address

P.O. Box 1735

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

H Lauderdale, FL

City & State

H Lauderdale, FL

4. FEI Number

65-1004317

Applied For

Not Applicable

Zip
33311

Country
USA

Zip
33302

Country
USA

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Judy Thomas

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

2813 SW 3 St

City

H Lauderdale

FL

Zip Code

33312

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE *President*
NAME *Judy Thomas*
STREET ADDRESS *2813 SW 3 St - H Lauderdale*
CITY-ST-ZIP *FL 33312*

TITLE *Vice President - Bernice Oneal*
NAME *1200 W 25 St*
STREET ADDRESS *Riviera Beach, FL 33404*
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 attachment with an address, with all other like empowered.

SIGNATURE

Judy Thomas - Judy Thomas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/11/03

Daytime Phone #

954584-

CR2E034B (12/02)