

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000040496

1. Entity Name
J B CONSTRUCTION GROUP, INC.



Principal Place of Business
**9126 QUEEN ELIZABETH CT.
ORLANDO, FL 32818**

Mailing Address
**9126 QUEEN ELIZABETH CT.
ORLANDO, FL 32818**



07262004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3637035

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BELLOCH, JOHN J
9126 QUEEN ELIZABETH CT
ORLANDO, FL 32818**

**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 reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**O
BELLOCHI, JOHN J
9126 QUEEN ELIZABETH CT
ORLANDO, FL 32818**

TITLE
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U00000168629
07/28/04-80004-006 158.75

**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)(c), 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 Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: **SIGNATURE AND COPIES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

20 July 04 407-467-3499
Date Daytime Phone #