2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000057769

1. Entity Name

JENNIFER TRANSPORTATION SERVICES, CORP.



FILED Mar 10, 2003 8:00 am Secretary of State

03-10-2003 90125 006 ***150.00

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Principal Place of Business 7766 JUNIPER STREET MIRAMAR FL 33023		Mailing Address 7766 JUNIPER STREET MIRAMAR FL 33023						
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2. Principal	Place of Business	3. Mailing Address			A I I I I I I I I I I I I I I I I I I I	i dili i dala dili i dali i dali	Bio bilia in	
Suite, Ap	t. #, etc.	Suite, Apt.,#, etc.			CHECK HERE IF MAKING CHANGES			
City & Sta	ate	City & State			A SELNumber	4. FEI Number 65-1028711 Applied		
Zip	Country	Zip	Country			00.75	Not Appl	
		• •		,	5. Certificate of Status Desired	□ \$8.75 / Fee Requ		
<u></u>	6. Name and Address of Curre	ent Registered Agent		Name	7. Name and Address of New Reg	istered Agent		
GOMEZ,	JENNIFER							
	NIPER STREET	Street Address		(P.O. Box Number is Not Acceptable)				
MIRAMAF	R FL 33023							
				City		FL Zip C	ode	
.8. The above	e named entity submits this statemen ations of registered agent.	t for the purpose of changing it	ts registered	office or regist	ered agent, or both, in the State of Florid	a. I am familiar wi	th, and a	
41			•					
SIGNATURE	Signature, typed or printed name of registered ag	ent and little if applicable. (NO	OTE: Registered A	gent signature requir	red when reinstating)	DATE		
	ILE NOW!!! FEE IS \$150.00							
	r May 1, 2003 Fee will be \$550.0			· · · · · · · · · · · · · · · · · · ·	9. Election Campaign Finan- Trust Fund Contribution.		.00 Mag	
+1 ter a(±30.2. 10.	k Payable to Florida Department OFFICERS AN	ID DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICE			
TITLE	D	☐ Delete	TITLE		.,	:HS AND DIRECTO		
NAME STREET ADDRESS	GOMEZ, JUAN C 7766 JUNIPER STREET		NAME				.—	
CITY-ST-ZIP	MIRAMAR FL 33023		CITY-ST	ADDRESS - ZIP		,		
TITLE	D	☐ Delete	TITLE		,	☐ Change	e	
NAME STREET ADDRESS	GOMEZ, JUAN C 17766 JUNIPER STREET		NAME STREET A	ADDRESS				
CITY-ST-ZIP	MIRAMAR FL 33023		CITY-ST		•			
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STREET ADDRESS	GOMEZ, JENNIFER C 7766 JUNIPER STREET	•	, NAME STREET A	ADDRESS				
CITY-ST-ZIP	MIRAMAR FL 33023		CITY-ST-					
TITLE NAME		☐ Delete	TITLE			☐ Change	A 🔲	
STREET ADDRESS			NAME Street A	DDBESS	•			
CITY-ST-ZIP			CITY-ST-		andrew (1964) and Springer States (1964)	n		
TITLE		☐ Delete	TITLE			☐ Change		
NAME STREET ADDRESS			NAME Street a	UUBEGG .				
CITY-ST-ZIP	٠ .	•	CITY-ST-					
TITLE		☐ Delete	TITLE			☐ Change	- D F	
NAME STREET ADDRESS			name Street ai	nnecco	٠,			
CITY-ST-ZIP			CITY-ST-					
12. I hereby c	ertify that the information supplied wi	th this filing does not qualify for		1	ection 119.07(3)(i) Florida Statutes + fuc			

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. If further certify that the information this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under output that I am an officer or directly 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15 103 (204) 985-1164 Date Daviene Preside #