

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

FILED
Jun 20, 2002 8:00 am
Secretary of State

06-20-2002 90061 006 ***150.00

DOCUMENT # P00000066602
1. Entity Name J.C. COMPLETE DRYWALL SERVICE
6454 A RED PINE LANE
WEST PALM BEACH, FLA 33415

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number <u>65-1050371</u>		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
Zip	Country	Zip	Country			

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name JUANITO Condori
Street Address (P.O. Box Number is Not Acceptable)
6454 A RED PINE LANE
WEST PALM BEACH
City WEST PALM BEACH FL Zip Code 33415

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.

SIGNATURE _____
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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>JUANITO Condori</u> <u>6454 A RED PINE LANE</u> <u>WEST PALM BEACH, FLA 33415</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/17/02 561) 357-7824
Date Daytime Phone #

CR2E034B (12/01)



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

Attachment
Document #
P00000066602

870393

June 3, 2002

J.C. COMPLETE DRYWALL SERVICE CORP.
6454 A RED PINE LANE
WEST PALM BEACH, FL 33415

SUBJECT: J.C. COMPLETE DRYWALL SERVICE CORP.
Ref. Number: P00000066602

We have received your document for J.C. COMPLETE DRYWALL SERVICE CORP. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Only applications approved by the Department of State are acceptable. Please complete the enclosed approved application and return it to our office.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 602A00035841

Attachment
Document #
P00000066602

J. C. Complete Drywall Service
6454A Red Pine Lane, West Palm Beach, FL 33415
561-357-7824

870393

EIN 65-1050371.

MAY 9, 2002

DIVISION OF CORPORATIONS: Dear Sir/Man AS 5/9/02
WE HAVE NOT RECEIVED OUR VBR, SO WE ARE SENDING
NOW THE \$150.00 TO RENEW OUR CORPORATION ON THE
ENVELOPE PROVIDED BY OUR ACCOUNTANT.

Please Renew our Corporation & WAIVE ANY Penalties.

Sincerely

Juanita Condore

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