06/24/2003 03:51 5618581969 SFS

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Jun 27, 2003 8:00 am
Secretary of State
06-27-2003 90052 029 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000070545

1. Entity Name

NOT JUST CARDS, INC.

DO NOT WRITE IN THIS SPACE

101088470

2. Principal Place of Business	3. Mailing Address
7778A NW 44TH ST	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SUNRISE, FL	City & State
Zip: 33351 Country: US	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-2257213 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: JANET ZIZZO

Street Address (P.O. Box Number is Not Acceptable): 6616 RACQUET CLUB DRIVE

City: LAUDERHILL FL Zip Code 33319

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

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	JANET ZIZZO
STREET ADDRESS	6616 RACQUET CLUB DRIVE
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	VPS
NAME	LORETTA MAYO
STREET ADDRESS	6616 RACQUET CLUB DRIVE
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. 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: [signature] JANET ZIZZO, PRESIDENT 7-25-03 954-578-6955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment #

10108972

P0000007045

6-25-03

I Spoke with Tom -

Advised Him we had moved our Location & not sure if Mail was not forwarded or Misplaced He Advised me to Download New Form & Send with $150.00 check.

Thanks

Jane