

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2003 8:00 am
Secretary of State

06-27-2003 90052 029 ***150.00

DOCUMENT #	P00000070545
1. Entity Name	NOT JUST CARDS, INC.

DO NOT WRITE IN THIS SPACE

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

4. FEI Number 52-2257213	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$3.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

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

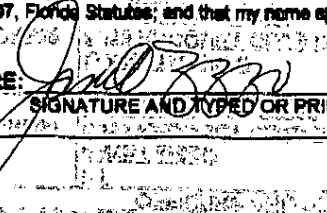
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1, 2003
Fees: \$150.00
Annual Report: \$20.00
Annual Renewal: \$20.00
Master Check Payment to: Secretary of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONAL INFORMATION	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT JANET ZIZZO 6616 RACQUET CLUB DRIVE LAUDERHILL, FL 33319	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS LORETTA MAYO 6616 RACQUET CLUB DRIVE LAUDERHILL, FL 33319	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(f), 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 fees empowered.

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
P000000070545

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

James