

# UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P00000080038**

1. Entity Name

**J a P INC. OF ORMOND BEACH**



FILED

03 FEB 28 AM 8:43

**DO NOT WRITE IN THIS SPACE**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2. Principal Place of Business

**100 BENT TREE DR**

Suite, Apt. #, etc.

**APT 71**

3. Mailing Address

**100 BENT TREE DR**

Suite, Apt. #, etc.

**APT 71**

City & State

**DAYTONA BEACH FL**

City & State

**DAYTONA BEACH FL**

Zip

**32114**

Country

Zip

**32114**

Country

**700013269777**

**02/28/03--01046--008 \*\*300.00**

DO NOT WRITE IN THIS SPACE

4. FEI Number

**593660895**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**PATEL PRAVIN C.**

Street Address (P.O. Box Number is Not Acceptable)

**100 BENT TREE DR APT 71**

City

**DAYTONA BEACH**

**FL**

Zip Code

**32114**

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

*Pravin Patel*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**02-21-03**

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P151T  
PATEL PRAVIN C  
100 BENT TREE DR APT 71  
DAYTONA BEACH FL 32114**

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**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: *Pravin Patel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**02-21-03**

DATE

**(386)-274-3297**

J & P INC OF ORMOND BEACH  
100 BENT TREE DRIVE APT 71  
DAYTONA BEACH, FL 32114

February 21, 2003

Secretary of State  
Division of Corporation  
P.O.Box 6327  
Tallahassee Fl 32314

Ref:- Document #P00000080038  
EIN:-59-3660895  
Waiver of penalty

Dear Sir/Madam,

With reference to above, I undersigned PATEL PRAVIN, President of J & P INC OF ORMOND BEACH would like to request you to waive the penalty for non-payment of Annual Filing Fees for 2002 on the following grounds.

I never received the Annual Filing Form for 2002, as we moved our registered office from the old address, and/or may be lost in the mail and/or delivered back to you, which was not forwarded to us. Unfortunatley, I never realized that I did not pay the annual filing fee for 2002 as I did not received the Filing Form for the year 2002. I made a mistake due to lack of knowledge and information & unavoidable circmstances. I would like to request you to waive the penalty on the basis of lack of knowledge, information and misunderstandings.

I am enclosing herewith the check of \$300.00 being an annaul filing fee for 2002 & 2003 as an exceptional case. I assure you that this is not going to happen in the future, if I will receive the Form on or before due date. Please waive the penalty on the basis of lack of knowledge, information, misunderstanding and undue hardship in this bad economy. Thanking you in advance for your cooperation. Sorry for the inconvenience that caused to you.

Sincerely,



(PATEL PRAVIN)

encl:- as above Ck of \$300