

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

206

FILED
Jun 03, 2002 8:00 am
Secretary of State

06-03-2002 91201 039 ***150.00

DOCUMENT # P0000096507

1. Entity Name

JRB ENGINEERING, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

90 FOREST TRAIL

Suite, Apt. #, etc.

3. Mailing Address

90 FOREST TRAIL

Suite, Apt. #, etc.

City & State

OVIEDO, FL

Zip

32765

Country

USA

City & State

OVIEDO, FL

Zip

32765

Country

USA

4. FEI Number

59-3731303

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Charles E Ball, III

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

90 Forest Trail

City

Oviedo,

FL

Zip Code

32765

**DO NOT WRITE
IN THIS SPACE**

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 amending)

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

D
BALL, CHARLES E III
90 FOREST TRAIL
OVIEDO, FL 32765

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
BALL, VICKI S
90 FOREST TRAIL
OVIEDO, FL 32765

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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**DO NOT WRITE
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES E (JR) Ball, Pres. 5/28/02

Entity, Print it

Entity, Print it

CR2E034B (12/01)