

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000099279

1. Entity Name

D & J REALTY ENTERPRISES, INC.

FILED

Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90056 009 ***163.75

Principal Place of Business

8500 LEESBURG PIKE, SUITE 314
VIENNA VA 22182

Mailing Address

8500 LEESBURG PIKE, SUITE 314
VIENNA VA 22182

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

54-2018189

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLORIDA INCORPORATORS, INC.
1221 BRICKELL AVENUE
SUITE 900
MIAMI FL 33131

Name

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

City

Zip Code

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) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
JONES, CHARLES JR.
STREET ADDRESS P.O. BOX 60145
CITY-ST-ZIP POTOMAC MD 20854

TITLE ☒ Change ☐ Addition
NAME P/T/D
Jones, Charles Jr.
STREET ADDRESS 8500 Leesburg Pike, Suite 314
CITY-ST-ZIP Vienna, Virginia 22182

TITLE ☐ Delete
NAME D
DELGADO, JAIME
STREET ADDRESS P.O. BOX 1029
CITY-ST-ZIP MONTEGO BAY, JAMAICA

TITLE ☒ Change ☐ Addition
NAME V/D
Delgado, Jaime
STREET ADDRESS P.O. Box 1029
CITY-ST-ZIP Montego Bay, Jamaica

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME S/D
Shirley M. Jones
STREET ADDRESS 8500 Leesburg Pike, Suite 314
CITY-ST-ZIP Vienna, Virginia 22182

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D
Camille Delgado
STREET ADDRESS P.O. Box 1029
CITY-ST-ZIP Montego Bay, Jamaica

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Charles Jones Jr. CHARLES JONES, JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/01

Date

703-734-1507

Daytime Phone #

CR2E034 (10/00)