

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 21, 2003 8:00 am**  
**Secretary of State**

01-21-2003 90115 038 \*\*\*150.00

**DOCUMENT # P01000002180**

1. Entity Name  
**J & I SUBCONTRACTORS INC.**



Principal Place of Business  
**420 HORIZON DRIVE  
WINTER SPRINGS FL 32708-3352**

Mailing Address  
**420 HORIZON DRIVE  
WINTER SPRINGS FL 32708-3352**



2. Principal Place of Business  
**316 TAVESTOCK LOOP**  
Suite, Apt. #, etc.

3. Mailing Address  
**316 TAVESTOCK LOOP**  
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State  
**WINTER SPRINGS FLORIDA**  
Zip  
**32708**  
Country  
**SEMINOLE**

City & State  
**WINTER SPRINGS FLORIDA**  
Zip  
**32708**  
Country  
**SEMINOLE**

4. FEI Number  
**59-3693924**

Applied For  
☐ Not Applicable

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

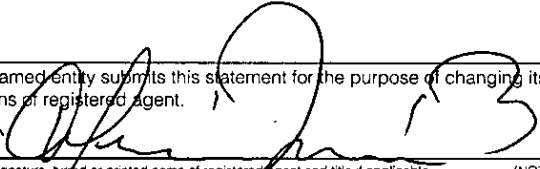
**6. Name and Address of Current Registered Agent**

**NAMEN, JOSE  
420 HORIZON DRIVE  
WINTER SPRINGS FL 32708-3352**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
**316 TAVESTOCK LOOP**  
City  
**WINTER SPRINGS** FL Zip Code  
**32708**

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  (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**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  
**D NAMEN, JOSE** ☐ Delete  
**420 HORIZON DRIVE**  
**WINTER SPRINGS FL 32708-3352**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D BORRERO, IVAN** ☐ Delete  
**561 LYNCHFIELD AVE**  
**ALTAMONTE SPRINGS FL 32714**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
**316 TAVESTOCK LOOP**  
**WINTER SPRINGS FL. 32708**

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

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

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

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

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-13-03

321-436-4105

Date

Daytime Phone #

CR2E034 (10/02)