2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT/UBR

DOCUMENT

2. Principal Place of Business

Country

Suite, Apt. #, etc.

GRAY, JANET P

2290 OAKS BLVD NAPLES FL 34119

the obligations of registered agent.

City & State

Zip

SIGNATURE

TIŤLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIE

CITY-ST-ZIP

TITLE

NAME

TITLE

TITLE

NAME

CITY-ST-ZIP

NAPLES FL 34119

JP GRAY RENTAL, INC.



Country

11.

TITLE

NAME

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NAME

STREET ADDRESS

STREET ADDRESS

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STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-7IP

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CITY-ST-ZIP

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City

P01000006118

1. Entity Name Principal Place of Business Mailing Address 2290 OAKS BLVD 2290 OAKS BLVD

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

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

OFFICERS AND DIRECTORS

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

GRAY, JANET P

2290 OAKS BLVD

NAPLES FL 34119

GRAY, BENJAMIN M

2290 OAKS BLVD

NAPLES FL 34119

NAPLES FL 34119

3. Mailing Address

City & State

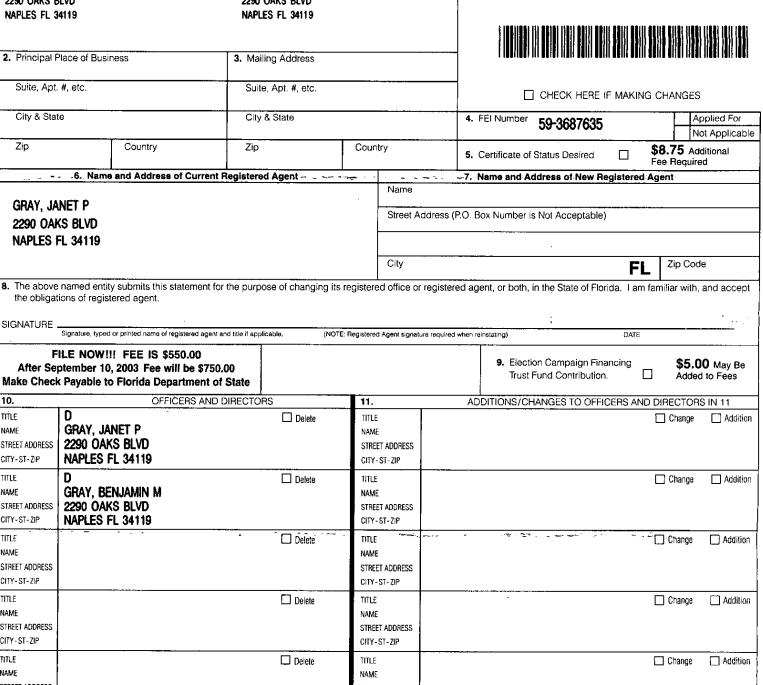
Zip

Suite, Apt. #, etc.



FILED Aug 13, 2003 8:00 am Secretary of State

08-13-2003 90077 011 ***550 00



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.

CITY-ST-ZIP

Daytime Phone #

☐ Change

___ Addition