

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P01000019018**1. Entity Name
J'N'J DATA, INC.

FILED

02 OCT 10 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
80135247

Principal Place of Business

9154 86TH AVE. N.
LARGO FL 33777

Mailing Address

9154 86TH AVE. N.
LARGO FL 33777

2. Principal Place of Business

11655 78th Ter N

Suite, Apt. #, etc.

3. Mailing Address

11655 78th Ter N

Suite, Apt. #, etc.

City & State

Seminole FL

City & State

Seminole FL

Zip

33772

Country

USA

Zip

33772

Country

USA

4. FEI Number

59-3706536

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

MILLER, JAMES A JR
9154 86TH AVE. N.
LARGO FL 33777

7. Name and Address of New Registered Agent

Name

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

11655 78th Ter N

City

Seminole

FL

Zip Code

33772

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

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

(NOTE: Registered Agent signature required when reinstating)

8/23/02

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 \$550.00**
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	TS	<input type="checkbox"/> Delete
NAME	MILLER, JAMES A JR	
STREET ADDRESS	9154 86TH AVE. N.	
CITY-ST-ZIP	LARGO FL 33777	
TITLE	DP	<input type="checkbox"/> Delete
NAME	WOODWARD, JOSEPH J	
STREET ADDRESS	9154 86TH AVE. N.	
CITY-ST-ZIP	LARGO FL 33777	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	James A Miller Jr	
STREET ADDRESS	11655 78th Ter N	
CITY-ST-ZIP	Seminole FL 33772	
TITLE	President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Joseph J. Woodward	
STREET ADDRESS	10314 111th St N	
CITY-ST-ZIP	Largo FL 33778	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (4/02)

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: *[Signature]* A Miller Jr 8/23/02 727-397-8651

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment
701000019018

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JnJ Data, Inc.
11655 78th Ter N
Seminole, FL 33772

August 24, 2002

To Whom It May Concern:

Enclosed is my payment for the UBR filing fee. However, we did not receive notice of this fee until well after the May 1st deadline. This has resulted in a late fee of \$400 to be applied.

I am requesting that this fee be waived. I have enclosed our payment of the original amount of \$150.00. If there is a problem in waiving the late fee, please be sure to contact me at the numbers listed below. I will be sure to resolve the issue.

Sincerely,



James A. Miller Jr.
Secretary