

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90899 018 ***150.00

DOCUMENT # P01000021007

1. Entity Name
J&D VENDING, INC.

Principal Place of Business
1704 PERSHING RD.
JACKSONVILLE FL 32205

Mailing Address
1704 PERSHING RD.
JACKSONVILLE FL 32205

2. Principal Place of Business
801 Sylvan Dr. E
 Suite, Apt. #, etc.

3. Mailing Address
801 Sylvan Dr. E.
 Suite, Apt. #, etc.

City & State
Brandon FL

City & State
Brandon FL

4. FEI Number
59-3718137

Applied For
☐ **Not Applicable**

Zip
33510

Country
Hillsborough

Zip
33510

Country
Hillsborough

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

6. Name and Address of Current Registered Agent

BELISARIO, JAMES E JR
1704 PERSHING RD.
JACKSONVILLE FL 32205

7. Name and Address of New Registered Agent

Name **Belisario, James E Jr**

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

801 Sylvan Dr. E

City **Brandon**

FL

Zip Code **33510**

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 *James E Belisario Jr* **President**

DATE **4-30-02**

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **DP** ☐ **Delete**
NAME **BELISARIO, JAMES E JR**
STREET ADDRESS **1704 PERSHING RD.**
CITY-ST-ZIP **JACKSONVILLE FL 32205**

TITLE **S** ☐ **Delete**
NAME **BELISARIO, DANITA**
STREET ADDRESS **1704 PERSHING RD.**
CITY-ST-ZIP **JACKSONVILLE FL 32205**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ **Change** ☐ **Addition**
NAME **Belisario, James E Jr**
STREET ADDRESS **801 Sylvan Dr E**
CITY-ST-ZIP **Brandon FL 33510**

TITLE **S** ☒ **Change** ☐ **Addition**
NAME **Belisario, Danita**
STREET ADDRESS **801 Sylvan Dr E**
CITY-ST-ZIP **Brandon FL 33510**

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

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

TITLE ☐ **Change** ☐ **Addition**
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 lists empowered.

SIGNATURE: *James E Belisario Jr*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

DATE **4-30-02**

Daytime Phone # **(813) 661-6397**

CR2E034 (9/01)