

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91203 016 ***150.00

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1. Entity Name
JRS COMMUNICATIONS, INC.



Principal Place of Business
**4000 HOLLYWOOD BLVD
SUITE 400 NO
HOLLYWOOD FL 33021**

Mailing Address
**4000 HOLLYWOOD BLVD
SUITE 400 NO
HOLLYWOOD FL 33021**



2. Principal Place of Business

4000 Hollywood Blvd

Suite, Apt. #, etc.

#435 So

City & State

Hollywood, FL

Zip

33021

Country

USA

3. Mailing Address

4000 Hollywood Blvd

Suite, Apt. #, etc.

#435 So

City & State

Hollywood, FL

Zip

33021

Country

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1088760**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**COHEN, MARK D ESQ
4000 HOLLYWOOD BLVD
SUITE 400 NO
HOLLYWOOD FL 33021**

7. Name and Address of New Registered Agent

Name
MARK D. COHEN, ESQ.
Street Address (P.O. Box Number is Not Acceptable)
**4000 Hollywood Blvd.
Ste. 435 South**
City
Hollywood FL Zip Code
33021

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)

DATE

4/17/03

**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 **D** ☐ Delete
NAME **COHEN, MARK D ESQ**
STREET ADDRESS **4000 HOLLYWOOD BLVD, SUITE 400 NO**
CITY-ST-ZIP **HOLLYWOOD FL 33021**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **MARK D. COHEN ESQ**
STREET ADDRESS **4000 Hollywood Blvd, Ste. 435 So.**
CITY-ST-ZIP **Hollywood, FL 33021**

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

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

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

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: **X**

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/03 (91) 962-1166

Date

Daytime Phone #

CR2E034 (10/02)