

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2002 8:00 am
Secretary of State

03-11-2002 90070 005 ***150.00

DOCUMENT # P01000029480

1. Entity Name

JACOB SEARCH GROUP, INC.

Principal Place of Business

1532 US 41 BY-PASS S., #276
 VENICE FL 34293-1032

Mailing Address

1532 US 41 BY-PASS S., #276
 VENICE FL 34293-1032

2. Principal Place of Business

8794 Merion Ave.

Suite, Apt. #, etc.

3. Mailing Address

8794 Merion Ave

Suite, Apt. #, etc.

City & State

Sarasota FL

City & State

Sarasota FL

4. FEI Number

65-1087659

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JACOB, GARY S

1532 US 41 BY-PASS S., #276

VENICE FL 34293-1032

7. Name and Address of New Registered Agent

Name

8794 Merion Avenue

City

Sarasota

FL

Zip Code

34238

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

[Signature]

2-19-02

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

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
 NAME JACOB, GARY S
 STREET ADDRESS 1532 US 41 BY-PASS S., #276
 CITY-ST-ZIP VENICE FL 34293-1032

TITLE D ☐ Delete
 NAME JACOB, DEBORAH L
 STREET ADDRESS 1532 US 41 BY-PASS S., #276
 CITY-ST-ZIP VENICE FL 34293-1032

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 ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 8794 Merion Avenue
 CITY-ST-ZIP Sarasota FL 34238

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 8794 Merion Avenue
 CITY-ST-ZIP Sarasota FL 34238

TITLE ☐ Change ☐ Addition
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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 like empowered.

SIGNATURE:

[Signature]

2-19-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)