

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 24, 2002 8:00 am**  
**Secretary of State**

05-21-2002 91169 002 \*\*\*158.75

**DOCUMENT # P01000030463**

1. Entity Name  
**JT ART WORLD.COM, INC.**

Principal Place of Business  
**9936 NW 57TH MANOR**  
**CORAL SPRINGS FL 33076**

Mailing Address  
**9936 NW 57TH MANOR**  
**CORAL SPRINGS FL 33076**

94500



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**1194 NW 140th AVE**

3. Mailing Address  
**PO Box 772046**

Suite, Apt. #, etc.  
**405**

Suite, Apt. #, etc.  
**CORAL SPRINGS**

City & State  
**LAUDER HILL, FL**

City & State  
**FLORIDA**

Zip  
**33313**

Country  
**USA**

Zip  
**33077**

Country  
**USA**

4. FEI Number ☐ Applied For  
☒ Not Applicable

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

## 6. Name and Address of Current Registered Agent

**KNOTT, PAULETTE**  
**9936 NW 57TH MANOR**  
**CORAL SPRINGS FL 33076**

## 7. Name and Address of New Registered Agent

Name **JOSEPH WILLIAMS**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1194 NW 140th AVE**  
**APT (405)**  
 City **LAUDER HILL, FL** Zip Code **33313**

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 **JOSEPH WILLIAMS (DP)** *[Signature]* DATE **6/10/02**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 **DP** ☒ Delete  
 NAME **KNOTT, PAULETTE**  
 STREET ADDRESS **9936 NW 57TH MANOR**  
 CITY-ST-ZIP **CORAL SPRINGS FL 33076**

TITLE **D** ☐ Delete  
 NAME **WILLIAMS, JOSEPH**  
 STREET ADDRESS **9936 NW 57TH MANOR**  
 CITY-ST-ZIP **CORAL SPRINGS FL 33076**

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 **JOSEPH WILLIAMS**  
 STREET ADDRESS **1194 NW 140th AVE APT (405) LAUDERHILL, FL 33313**  
 CITY-ST-ZIP

TITLE **VP** ☐ Change ☒ Addition  
 NAME **MARTIN TEDDY WILLIAMS**  
 STREET ADDRESS **1194 NW 140th AVE APT (405) LAUDERHILL, FL 33313**  
 CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
 NAME **ANNICHELLE COOMBS**  
 STREET ADDRESS **1194 NW 140th AVE LAUDERHILL, FL 33313**  
 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 like empowered.

SIGNATURE: *[Signature]* **JOSEPH WILLIAMS** DATE **04/19/2002** (980) 530-8107  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)