

FILED

AMENDED

U.B.R.

02 AUG 16 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDAFOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PO1000032718

Entity Name
B J INVESTORS, INC

700007287697--5

08/22/02--01059--025

*****\$1.25 *****\$1.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 2443 NW 100 ST

Mailing Address: 2443 NW 100 ST

Suite, Apt., etc.: Suite, Apt., etc.:

City & State: MIAMI FL

City & State: MIAMI FL

Zip: 33147

Zip: 33147

DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For:
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name: BRYAN JACKSON

Street Address (P.O. Box Number is Not Acceptable): 2443 NW 100 ST

City: MIAMI FL

Zip Code: 33147

DO NOT WRITE
IN THIS SPACE

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: *Bryan Jackson* BRYAN JACKSON 8-1-02

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

(NOTE: Registered Agent signature required when renewing)

DATE

9. This corporation is eligible to satisfy its intangible

tax filing requirements and elects to do so.

(See criteria on back)

10. Election Campaign Financing

\$5.00 May Be
Added to Fees

11. Officers and Directors:

TITLE: PRESIDENT / TREASURER
NAME: BRYAN JACKSON
STREET ADDRESS: 2443 NW 100 ST
CITY, ST, ZIP: MIAMI FL 33147TITLE: PRESIDENT / TREASURER
NAME: PAMELA JACKSON
STREET ADDRESS: 320 SO. FLAMINGO RD
CITY, ST, ZIP: MIAMI FL 33135TITLE: NEW CURRENT CHANGE
NAME: NEW CURRENT CHANGE
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attached statement of an officer, director, receiver or trustee.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: *Bryan Jackson* BRYAN JACKSON, PRESIDENT-TREASURER 8-1-02

REGISTERED AGENT: 305 403 0860

SOLE-SHARE HOLDER
100 SHARES

NEW REGISTERED AGENT

(1201) BROCK