

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90150 030 ***150.00

DOCUMENT # PO1000043927 ✓

1. Entity Name
BJ Construction & Design, Inc.

DO NOT WRITE IN THIS SPACE

642070

2. Principal Place of Business
3147 Galloway Oaks
Suite, Apt. #, etc.

3. Mailing Address
PO Box 841
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Lakeland, FL

City & State
Highland City, FL

Zip 33810 **Country** USA

Zip 33846 **Country** USA

4. FEI Number
59-3714151

Applied For
☐ Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Ronald E. Richardson

Street Address (P.O. Box Number is Not Acceptable)
3147 Galloway Oaks

City Lakeland **FL** **Zip Code** 33810

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, typed or printed name of registered agent and title 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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	P/S Richardson, Ferzeda V. 3147 Galloway Oaks Lakeland, FL 33810	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE Ferzeda V. Richardson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/02 **863 581-4382**
Date Daytime Phone #

CR2E034B (12/01)