

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

04-21-2003 91052 030 ***150.00

DOCUMENT # P01000052169

1. Entity Name
J & E ELITE SERVICES, INC.



Principal Place of Business
**110 BONAVENTURE BLVD
207
WESTON FL 33326**

Mailing Address
**110 BONAVENTURE BLVD
207
WESTON FL 33326**

2. Principal Place of Business
120 Bonaventure Blvd
Suite, Apt. #, etc.
107

3. Mailing Address
P.O. Box 267982
Suite, Apt. #, etc.

City & State
WESTON FL

City & State
WESTON FL

4. FEI Number
59-3718408

Applied For
☐ Not Applicable

Zip
33326

Country
USA

Zip
33326

Country
USA

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

6. Name and Address of Current Registered Agent

**FERMIN, JOSE E
110 BONAVENTURE BLVD
207
WESTON FL 33326**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-18-2003

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 **DPT** ☐ Delete
NAME **FERMIN, JOSE E**
STREET ADDRESS **110 BONAVENTURE BLVD #207**
CITY-ST-ZIP **WESTON FL 33326**

TITLE **DV** ☐ Delete
NAME **FERMIN, ELVIA J**
STREET ADDRESS **110 BONAVENTURE BLVD #207**
CITY-ST-ZIP **WESTON FL 33326**

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 **DPT** ☒ Change ☐ Addition
NAME **FERMIN, JOSE E**
STREET ADDRESS **120 BONAVENTURE BLVD. #107**
CITY-ST-ZIP **WESTON FL 33326**

TITLE **DV** ☒ Change ☐ Addition
NAME **FERMIN, ELVIA J**
STREET ADDRESS **120 BONAVENTURE BLVD. #107**
CITY-ST-ZIP **WESTON, FL 33326**

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

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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/18/2003
Date

954 673 8431
Daytime Phone #

CR2E034 (10/02)