## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000058372

Entity Name: SOHO JAX, INC.

Apr 11, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5755 MACY AVE. JACKSONVILLE, FL 32211 **Current Mailing Address: New Mailing Address:** 5755 MACY AVE. JACKSONVILLE, FL 32211 FEI Number: 59-3729828 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SISSON, LARRY 218 SOUTHERN COUNTRY LN. QUINCY, FL 32351 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition BECKMAN, JASON BECKHAM, JASON Name: Name: 244 JOHNS GLEN DR. 244 JOHNS GLEN DR. Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: JACKSONVILLE, FL 32259 Title: DV Title: () Change () Addition () Delete Name: BECHIOM, WILLIAM JR Name: 113 SOUTHERN GROVE DR. Address: Address: JACKSONVILLE, FL 32259 City-St-Zip: City-St-Zip: Title: Title: DST () Delete DST (X) Change ( ) Addition O'CONNOR, DAN Name: O'CONNOR, DAN Name: 5059 ACRE ESTATES DR. W. 4629 AVON I N Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL M. O'CONNOR DST 04/11/2002