2002 UNIFORM BUSINESS REPORT (UBR)

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

DOCUMENT# P01000060186

Entity Name: DOUBLE JAY'S DELI, INC.

Current Principal Place of Business:

4949 MARBRISA DRIVE
UNIT 108
TAMPA, FL 33624

New Principal Place of Business:

7530 W. WATERS AVENUE
SUITE C
TAMPA, FL 33615

Current Mailing Address:

4949 MARBRISA DRIVE
UNIT 108
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-3725562 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

JAYCOX, JAMES F MR
4949 MARBRISA DRIVE
APT 108
TAMPA, FL 33624 US

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: JAMES F. JAYCOX 04/29/2002
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:

Title: PTD ( ) Delete
Name: JAYCOX, JAMES F
Address: 4949 MARBRISA DRIVE
City-St-Zip: TAMPA, FL 33624

Title: VD ( ) Delete
Name: JAYCOX, JOHN F
Address: 4949 MARBRISA DRIVE
City-St-Zip: TAMPA, FL 33624

Title: S ( ) Delete
Name: JAYCOX, RAMONA
Address: 4949 MARBRISA DRIVE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: JAYCOX, JAMES F
Address: 4949 MARBRISA DRIVE, 108
City-St-Zip: TAMPA, FL 33624

Title: VD (X) Change ( ) Addition
Name: JAYCOX, JOHN F
Address: 4949 MARBRISA DRIVE, 108
City-St-Zip: TAMPA, FL 33624

Title: S (X) Change ( ) Addition
Name: JAYCOX, RAMONA
Address: 4949 MARBRISA DRIVE, 108
City-St-Zip: TAMPA, FL 33624

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: JAMES F. JAYCOX PTD 04/29/2002
Electronic Signature of Signing Officer or Director Date