

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2002 8:00 am
Secretary of State

02-10-2002 90044 021 ***150.00

DOCUMENT # P01000063157

1. Entity Name
CJB, INC.

Principal Place of Business
**430 72ND ST SOUTH
 ST PETERSBURG FL 33707**

Mailing Address
**430 72ND ST SOUTH
 ST PETERSBURG FL 33707**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3734853

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**BATTAGLIA, CHRISTINA M
 430 72ND ST SOUTH
 ST PETERSBURG FL 33707**

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.

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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing - ☐ **\$5.00** May Be
 Trust Fund Contribution. Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **BATTAGLIA, CHRISTINA M**
 STREET ADDRESS **430 72ND ST SOUTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33707**

TITLE **D** ☐ Delete
 NAME **BATTAGLIA, CATHERINE J**
 STREET ADDRESS **430 72ND ST SOUTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33707**

TITLE **D** ☐ Delete
 NAME **BATTAGLIA, ANTHONY S**
 STREET ADDRESS **430 72ND ST SOUTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33707**

TITLE **D** ☐ Delete
 NAME **BATTAGLIA, MARC A**
 STREET ADDRESS **430 7ND ST SOUTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33707**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CEO SEC. TREASURER** ☐ Change ☒ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PRESIDENT** ☐ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VICE PRESIDENT** ☐ 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

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Catherine Jean Battaglia 1-22-02 727 381-4407
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CATHERINE JEAN BATTAGLIA PRES.

CR2E034 (9/01)