



FILED

03 SEP 18 AM 11:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000074887					
1. Entity Name J.R. MARTIN, INC.					
Principal Place of Business 3410 LINDSEY ST DOVER, FL 33527			Mailing Address POST OFFICE BOX 90 DOVER, FL 33527		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3741375	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MARTIN, JOSEPH R 3410 LINDSEY ST DOVER, FL 33627			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent's signature required when submitting)</small>					
FILE NOW!!! FEE IS \$160.00 After May 1, 2003 Fee will be \$650.00 Antenned UBR is \$21.25 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D		TITLE		
NAME	MARTIN, JOSEPH R		NAME		
STREET ADDRESS	3410 LINDSEY ST		STREET ADDRESS		
CITY-ST-ZIP	DOVER, FL 33627		CITY-ST-ZIP		
TITLE	PVST		TITLE		
NAME	MARTIN, JOSEPH R		NAME		
STREET ADDRESS	3410 LINDSEY ST		STREET ADDRESS		
CITY-ST-ZIP	DOVER, FL 33627		CITY-ST-ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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)(1), 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:  _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date: _____ Daytime Phone: _____					

CR2E034 (10/02)

7/9/18

**J. R. MARTIN, INC.
P. O. Box 90
Dover, Florida 33527
(813) 240-5787**

September 12, 2003

Florida Department of State
Division of Corporations
Tallahassee Florida

RE: J R Martin, Inc. P01000074887

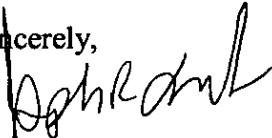
Dear Sir/Madam:

Again this year I have received no paperwork for the corporate annual filing. It was not until my CPA asked where My corporate papers were that I became aware I had not received anything.

I called your office and was told to fill out the form from the internet and send a letter stating that I had not received the form and send \$150.00.

Please accept my money order of the fee and the downloaded form which is enclosed.

Sincerely,



Joseph R. Martin, President