

2002 UNIFORM BUSINESS REPORT (UBR)

09-18-2002 90060 001 ***600.00

P01000079720

DOCUMENT # P01000079720

1. Entity Name

JEMZ PROPERTIES AND INVESTMENTS INC.

Principal Place of Business
1101 N. CONGRESS AVENUE
SUITE 201
BOYNTON BEACH FL 33426Mailing Address
1101 N. CONGRESS AVENUE
SUITE 201
BOYNTON BEACH FL 33426

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

☒ Applied For
☐ Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WATSON, MICHAEL A
1101 N. CONGRESS AVENUE
SUITE 201
BOYNTON BEACH FL 33426

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, typed or printed name of registered agent and UBR # 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 \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PS	WATSON, MICHAEL A	1101 N. CONGRESS BLVD, SUITE 201	BOYNTON BEACH FL 33426	☐
VT	WATSON-MERCIER, EDITH	1101 N. CONGRESS BLVD, SUITE 201	BOYNTON BEACH FL 33426	☐
				☐
				☐
				☐
				☐

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

3. 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 employees.

SIGNATURE: _____

9-12-02

02 OCT 16 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Attachment~~REDACTED~~

9/14/02

FLORIDA DEPARTMENT STATE
DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
PO BOX 1500 TALLAHASSEE FL 32302-1500

PLEASE ACCEPT THESE FAXED COPIES
OF REPORTS TOGETHER WITH
PAYMENT OF \$600 FOR 4 ENTITIES
PLEASE NOTICE MY BANK CHARGED
ME $150 \times 4 = 600$ IN MARCH 2001
WHEN I ARRANGED FOR
ELECTRONIC PAYMENT

✓ *MW*
MICHAEL WATSON

CHECK TO DEPT OF STATE 600
DATED 9/14/02