

2002 UNIFORM BUSINESS REPORT (UBR)

3/3

FILED
Jun 23, 2002 8:00 am
Secretary of State

03-03-2002 90114 027 ***150.00

DOCUMENT # P01000102774

1. Entity Name
JC'S SANDWICH SHOP, INC.

Principal Place of Business
**3901 CEDAR CAY CIR.
VALRICO FL 33594**

Mailing Address
**3901 CEDAR CAY CIR.
VALRICO FL 33594**



2. Principal Place of Business

1911 U.S. Hwy 301, No.

3. Mailing Address

- same -

Suite, Apt. #, etc.

Ste. 190

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Zip

33619

Country

Hillsborough

Zip

Country

4. FEI Number

X 59-3752210

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CARRILLO
CARRILLO, JOAQUIN L
3901 CEDAR CAY CIR.
VALRICO FL 33594**

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
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**P
CARRILLO, JOAQUIN L
3901 CEDAR CAY CIRCLE
VALRICO FL 33594**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**ST
CARRILLO, JORGE A
609 HICKORY LAKE DRIVE
BRANDON FL 33511**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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: *Joaquin Carrillo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-17-02 **X (813) 620-3778**

Daytime Phone #

CR2E034 (9/01)