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FILED
Sep 08, 2002 8:00 am
Secretary of State

08-12-2002 90008 030 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000103901

1. Entity Name

J B CONSULTING, INC.

Principal Place of Business

731 ALDA WAY NE
ST PETERSBURG FL 33704

Mailing Address

731 ALDA WAY NE
ST PETERSBURG FL 33704

2. Principal Place of Business

3. Mailing Address

P.O. Box 86371

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Madeira Bch, FL

City & State

4. FEI Number

59-374 3928

Applied For

Not Applicable

Zip

33708

Country

Pinellas

Zip

Country

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLOCK, JODY
731 ALDA WAY NE
ST PETERSBURG FL 33704

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 re-registering)

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: Jody Block President ☐ Delete
 NAME: P.O. Box 86371
 STREET ADDRESS: Madeira Bch, FL 33708
 CITY-ST-ZIP:

TITLE: ☐ Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: ☐ Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: ☐ Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

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: ☐ 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:

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 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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

Attachment

98892
PO 1000 103901

August 5, 2002

From: Jody Block

Reg: J B Consulting Inc.

To: Fl. Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

To whom it may concern:

I have just found out that my address was never changed from 731 Alda Way NE, St. Petersburg, FL to P.O. Box 86371, Madeira Beach, FL 33708. I haven't been receiving the Annual Business Report so I am enclosing a check for \$150.00 for this fee owed to you. I hope you will accept this and please note my change of address.

Thank you for your cooperation.

Jody Block
Jody Block
President, J B Consulting Inc.