

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P01000109702**1. Entity Name
THE L.A.J. GROUP, INC.**FILED**
Jul 21, 2002 8:00 am
Secretary of State

07-21-2002 90013 003 ***158.75

Principal Place of Business

**4327 S. HIGHWAY 27
#331
CLERMONT FL 34711**

Mailing Address

**4327 S. HIGHWAY 27
#331
CLERMONT FL 34711**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3759351

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****CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301****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. I am familiar with, and accept the obligations of registered agent.

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 \$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**TITLE
NAME **D JOHNSON, LINDA A** ☐ Delete
STREET ADDRESS **4327 S. HIGHWAY 27, #331**
CITY-ST-ZIP **CLERMONT FL 34711**TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/16/02

Daytime Phone #

0106973 AV

CR2E034 (4/02)

Visiting
Angels.



LIVING ASSISTANCE SERVICES

Lic. #HCS 228175

Attachment
Document #
PO1000109702
B0130299

Phone: 407-654-8893
Fax: 407-905-0885

4327 S. Highway 27, Suite 331
Clermont, FL 34711
Angelsoflake@aol.com



July 16, 2002

Division of Corporations
UBR Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir/Madam,

Enclosed, please find my completed UBR. My corporation was filed in November 2001 and actively began business in March 2002.

I received this report for the first time 10 days ago. My address has been the same since incorporation, but I just received it. I've enclosed my check in the amount \$150.00 plus \$8.75 for Certificate of Status totaling \$158.75. Please call with any questions.

Sincerely,

Linda A. Johnson
Director