

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2003 8:00 am
Secretary of State

08-21-2003 90109 002 ***150.00

DOCUMENT # P02000025979

1. Entity Name
JEFFERS SHEETING, INC.



Principal Place of Business
1606 CAMPUS PLACE
ORANGE PARK, FL 32065 US

Mailing Address
1606 CAMPUS PLACE
ORANGE PARK, FL 32065 US

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
7358 Boysenberry Ct.
Suite, Apt. #, etc.

City & State
Jacksonville, Florida

Zip
32244

Country
Duval



Adding information
☒ CHECK HERE IF MAKING CHANGES

5. Name and Address of Current Registered Agent
JEFFERS, JAMES L JR.
1606 CAMPUS PLACE
ORANGE PARK, FL 32065

4. FEI Number
03-0400141

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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 _____ (NOTE: Registered Agent signature required when administering) DATE _____

FILED MONTHLY FEE IS \$750.00
After May 1, 2003, the fee will be \$500.00
Amended UBR is 401.00
Make check payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President James Jeffers 7358 Boysenberry Ct. Jacksonville, FL 32244	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James L. Jeffers August 18, 2003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR Date Daytime Phone #

CRZE034 (10/02)

Attachment

80139599

P02000025979

August 18, 2003

Florida Department of State
Division of corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

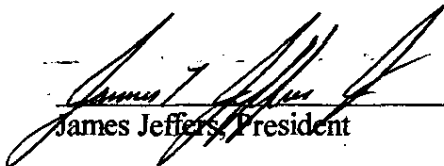
RE: Renewal Department

To Whom It May Concern:

Per our phone conversation, I am writing this letter to state that I never received the UBR renewal papers. As you stated, I downloaded a copy off the Internet, filled out any information necessary and I am sending it to you with the \$150.00 renewal fee.

I appreciate your assistance with this matter.

Sincerely,


James Jeffers, President