

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90067 035 ***150.00

DOCUMENT # P02000028887	
1. Entity Name	
JBH of central Florida Inc	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business P O Box 983		3. Mailing Address PO BOX 983	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Kathleen, FL		City & State KATHLEEN	
Zip 33849	Country	Zip 33849	Country US

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Herman Singh
Street Address (P.O. Box Number is Not Acceptable)
500S R 436 Ste 2016

City
CASSELBERRY **FL** **Zip Code**
32707

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to: Florida Department of State

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

10. OFFICERS AND DIRECTORS

11.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SINGH, JAGTAR
PO BOX 983
KATHLEEN FL 33849

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Jagtar Singh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/06

Date

863-853-9384

Daytime Phone #