

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2003 8:00 am
Secretary of State

9/8/

09-08-2003 90139 036 ***550.00

DOCUMENT # P02000077559

1. Entity Name
JET MOVERS INC.



Principal Place of Business
4570 N. Hiatus Rd.
SUNRISE FL 33351

Mailing Address
1110 W. Oakland Park Blvd.
SUNRISE FL 33351 # 234

55056765

2. Principal Place of Business
4570 N. Hiatus Rd.
Suite, Apt. #, etc.

3. Mailing Address
1110 W. Oakland Park Blvd.
Suite, Apt. #, etc.
234

☒ CHECK HERE IF MAKING CHANGES

City & State
Sunrise, FL

City & State
Sunrise, FL

4. FEI Number
52-2372902

Applied For
☐ Not Applicable

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

Zip
33351

Country
Broward

Zip
33351

Country
Broward

6. Name and Address of Current Registered Agent
HAREL, YOSHI
10661 NW 14 ST #249
PLANTATION FL 33322

7. Name and Address of New Registered Agent
Name
Yossi Harel
Street Address (P.O. Box Number is Not Acceptable)
4570 N. Hiatus Rd.
City
Sunrise FL Zip Code
33351

B. 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 **Yossi Harel** **9/2/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
① President Yossi Harel 1110 W. Oakland Park Blvd. #234 Sunrise, FL 33351					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
② Co-owner Yaela Goldmann 3225 NE 13th St. #202 Pompano Beach, FL 33062					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		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"/> Delete		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: **SIGNATURE REQUIRED** **8/29/2003** **(954) 572-5444**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

ATTACHMENT
Division of Corporations

Receipt

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Page 1 of 1
[REDACTED]
P02000077557

Your data entry is complete. This is your receipt page. Please print and retain this page for your records.

Document Number: **P02000077559**

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The charge for your UBR is
\$550.00

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To proceed to pay for the UBR, press the CONTINUE button below:

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