

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90503 029 ***150.00

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DOCUMENT # P02000083306

1. Entity Name
JLC & SONS, INC.



Principal Place of Business
**1020 W. MITCHELL HAMMOCK
OVIEDO FL 32765**

Mailing Address
**1020 W. MITCHELL HAMMOCK
OVIEDO FL 32765**



2. Principal Place of Business

3. Mailing Address

1723 BROOK HOLLOW DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
ORLANDO, FL

4. FEI Number

51-0419294

Applied For

Not Applicable

Zip

Country

Zip

Country

32824

ORANGE

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COLON, JORGE
1020 W. MITCHELL HAMMOCK
OVIEDO FL 32765**

Name

Jorge Colon

Street Address (P.O. Box Number is Not Acceptable)

1723 BROOK HOLLOW DR

City

ORLANDO

FL

Zip Code

32824

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 **Jorge L. Colon - President**

Signature, typed or printed name of registered agent and title if applicable.

Jorge L. Colon - President

(NOTE: Registered agent signature required when reinstating)

4/25/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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	P	<input type="checkbox"/> Delete
NAME	COLON, JORGE	
STREET ADDRESS	1020 W. MITCHELL HAMMOCK	
CITY-ST-ZIP	OVIEDO FL 32765	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

Jorge L. Colon - President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jorge L. Colon - President 4/25/03 321-945-9576 CE114
Date Daytime Phone #

CR2E034 (10/02)