

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 27, 2003 8:00 am
Secretary of State

08-27-2003 90080 009 ***150.00

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DOCUMENT # P02000115306

1. Entity Name

JEBROCHE CORPORATION



Principal Place of Business

**5300 PINE TREE DRIVE
MIAMI BEACH FL 33140**

Mailing Address

**5300 PINE TREE DRIVE
MIAMI BEACH FL 33140**

2. Principal Place of Business

55 NE 24th St

3. Mailing Address

55 NE 24th St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

81-0576469

Applied For

Not Applicable

Zip

Country

USA

Zip

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SHEMROCK, BRUCE E ESQ.
8872 SW 129 TERRACE
MIAMI FL 33176**

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☒ Addition

**PRESIDENT
Jeffrey S. ADLER
55 NE 24th St
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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☐ 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/24/03

305.401.7883

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

80141442

JeBROCHE CORPORATION.

55 NE 24TH STREET
MIAMI, FL 33137
PHONE: 305.573.1010
EMAIL: JADLER@AOL.COM

August 24, 2003

Florida Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: P02000115306
JeBroche Corporation

Dear Sir/Madam:

Pursuant to response number 1 to the Frequently Asked Questions section included with your 2003 For Profit Corporation Uniform Business Report (UBR) Form, as president of the above-referenced corporation, I hereby inform the department that this corporation did not receive any prior notice regarding the UBR. Accordingly, please find enclosed JeBroche's UBR and a check for \$150.00 to cover the requisite fee.

Yours truly,


Jeffrey S. Adler

Encl.