FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JUN 10 PM 1:26

DOCUMENT # P03000101321

1. Entity Name

Jagor Enterprises, Incorporated

DO NOT WRITE IN THIS SPACE

66014747
04/20/05 80080 002 $150.00
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
7315 NW 54th Street		7315 NW 54th Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Lauderhill, FL		City & State: Lauderhill, Florida	
Zip: 33319-6346	Country: USA	Zip: 33319-6346	Country: USA

4. FEI Number: 20-0237570 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Fitzroy A. Gordon

Street Address (P.O. Box Number is Not Acceptable): 7315 NW 54th Street

City: Lauderhill FL Zip Code: 33319

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 X [signature] Fitzroy A. Gordon 3/28/2005

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 Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/CEO/Chairperson Fitzroy A Gordon 7315 NW 54th Street Lauderhill, Florida 33319	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Advisor/Ex-officio Clifton H. Rodriquez, CPA 3146 NW 68 Street Ft. Lauderdale, Florida 33309-1206	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	**DO NOT WRITE IN THIS SPACE**
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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: X [signature] Fitzroy A. Gordon 3/28/2005 (954)578-8488

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #