


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

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-20-2004 90007 013 ***150.00

DOCUMENT # P03000/30402

1. Entity Name
J+J Holdings Maintenance Inc



DO NOT WRITE IN THIS SPACE

24013266

2. Principal Place of Business
1403 S. Grove Ave

3. Mailing Address
SAME

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Ft Myers FL

City & State
FL

4. FEI Number
86-1087033

Applied For
☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name
Deborah Shonk

Street Address (P.O. Box Number is Not Acceptable)
17560 Lee Rd.

City
Ft Myers

FL

Zip Code
33919

**DO NOT WRITE
IN THIS SPACE**

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 Deborah J. Shonk 2/16/04

(NOTE: Registered Agent signature required when reinstating)

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			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Joel Holden</u> <u>1403 S. Grove Ave</u> <u>Ft Myers FL 33919</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Treas</u> <u>Jacinda Holden</u> <u>1403 S. Grove Ave</u> <u>Ft Myers FL 33919</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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: Jacinda Holden Sec Tues 2/16/04 239-275-1872

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2034B (12/02)