

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

FILED
Aug 11, 2004 8:00 am
Secretary of State

08-11-2004 90002 014 ***150.00

DOCUMENT # P0400000413

1. Entity Name

JUNIA + JON IPC

DO NOT WRITE IN THIS SPACE

54067737

2. Principal Place of Business

2540 NE 17th St

3. Mailing Address

20810 W. Dixie

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Hwy 11011 Beach

DO NOT WRITE IN THIS SPACE

City & State

MIAMI BEACH

City & State

FLORIDA 33180

4. FEI Number

20-053 7797

Applied For

Not Applicable

Zip

33180

Country

DADE

Zip

33160

Country

DADE

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

PRES
NASIR JAHAR
6500 OCEAN BLVD
GOLDEN ISLES FL 33160

TITLE
NAME

STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nasir Jahar

8/12/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment
Dr. # 004000000413
**A.R.S. &
ASSOCIATES
INC.**
Payroll, Healthcare, Non-Profit,
Individual & Corporate Accounting

524067737

August 4, 2004

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

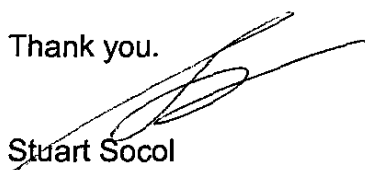
Re: Jumma & Son, Inc. 2004 For Profit Corporation Report

To Whom It May Concern:

My client Jumma & Son, Inc. did not receive the 2004 For Profit Corporation Business Report.
The mailing address is 20810 W. Dixie H'way, North Miami Beach, Florida 33180.

Enclosed id a check for \$150.00 to cover the fees.

Thank you.


Stuart Socol