

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 03, 2001 8:00 am**  
**Secretary of State**

05-03-2001 90960 002 \*\*\*158.75

**DOCUMENT # P36922**

1. Entity Name

**JAFFA ROAD (FLORIDA) MANAGEMENT INC.**

Principal Place of Business

**100 E MADISON  
TAMPA FL 33602  
US**

Mailing Address

**C/O J. BOB HUMPHRIES. ESQ.  
P.O. BOX 1438  
TAMPA FL 33601**

2. Principal Place of Business

**501 E. Kennedy Boulevard**

Suite, Apt. #, etc.

**Suite 1700**

City & State

**Tampa, FL**

3. Mailing Address

**c/o Mitchell I. Horowitz, Esq.**

Suite, Apt. #, etc.

**P. O. Box 1438**

City & State

**Tampa, FL**



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3149602**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HUMPHRIES, BOB J ESQ  
FOWLER, WHITE, GILLEN, ET AL  
501 E. KENNEDY BLVD., SUITE 1700  
TAMPA FL 33602**

7. Name and Address of New Registered Agent

Name

**Mitchell I. Horowitz, Esq.**

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

**Fowler, White, Gillen, et al.**

**501 E. Kennedy Boulevard, Suite 1700**

City

**Tampa**

**FL**

Zip Code

**33602**

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

*Mitchell I. Horowitz*

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

(NOTE: Registered Agent signature required when reinstating)

**4-25-01**

DATE

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

**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
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	<b>PST JACOBS, FRANK 161 BAY STREET TORONTO, CANADA</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS HUMPHRIES, BOB J 501 E. KENNEDY BLVD. TAMPA FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CD JACOBS, FRANK 161 BAY STREET, BCE PL. TORONTO, ONT., CANADA</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS Mitchell I. Horowitz 501 E. Kennedy Boulevard, Suite 1700 Tampa, FL 33602</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Mitchell I. Horowitz, Asst Secretary*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/25/01**

Date

**813-228-7411**

Daytime Phone #

CR2E034 (10/00)