

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P36922

FILED
May 06, 2002 8:00 AM
Secretary of State

Entity Name: JAFFA ROAD (FLORIDA) MANAGEMENT INC.

Current Principal Place of Business:

501 E. KENNEDY BLVD
SUITE 1700
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

C/O MITCHELL I. HOROWITZ, ESQ
P.O. BOX 1438
TAMPA, FL 336011438

New Mailing Address:

FEI Number: 59-3149602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOROWITZ, MITCHELL I ESQ
FOWLER, WHITE, GILLEN, ET AL
501 E. KENNEDY BLVD., SUITE 1700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: JACOBS, FRANK
Address: 161 BAY STREET
City-St-Zip: TORONTO, CANADA,

Title: AS () Delete
Name: HOROWITZ, MITCHELL I ESQ
Address: 501 E. KENNEDY BLVD., STE 170
City-St-Zip: TAMPA, FL 33602

Title: CD () Delete
Name: JACOBS, FRANK
Address: 161 BAY STREET, BCE PL.
City-St-Zip: TORONTO, ONT., CANADA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MITCHELL I. HOROWITZ, ESQ.

AS

05/06/2002

Electronic Signature of Signing Officer or Director

_____ Date