

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P38331

1. Entity Name

S B JAX, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90012 004 ***150.00

Principal Place of Business

Mailing Address

~~2750 50 NORTH LAURA STREET~~
~~JACKSONVILLE FL 32202~~
US

~~2750 50 NORTH LAURA STREET~~
JACKSONVILLE FL 32202
US

2. Principal Place of Business

3. Mailing Address

~~UWSA SERVICES, INC.~~
Suite, Apt. #, etc.

~~UWSA SERVICES, INC.~~
Suite, Apt. #, etc.

701 PEACHTREE ROAD

701 PEACHTREE ROAD

City & State

City & State

ORLANDO

ORLANDO

Zip

Country

Zip

Country

32804

USA

32804

USA

4. FEI Number

59-3103569

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~MOTOLAN, INC.~~
50 NORTH LAURA STREET
JACKSONVILLE FL 32202

Name

UWSA SERVICES INC.

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

701 PEACHTREE ROAD

City

ORLANDO

FL

Zip Code

32804

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

21 APR 00

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
CHARTOUNI, NABIL
73 BROOK STREET
LONDON W1 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SUTHERLAND, BARBARA
73 BROOK STREET
LONDON W1 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
VINOD, VAGHADIA
73 BROOK STREET
LONDON W1 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
EWING, KEITH
604 COURTLAND ST STE 138
ORLANDO FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
CHARTOUNI, CAMCRON
73 BROOK STREET
LONDON ENGLAND W17- 17E ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V. VAGHADIA -- SECRETARY

APRIL 13 2000

Date

Daytime Phone #

(407) 425 6880

CR2E034 (9/99)