

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2001 8:00 am
Secretary of State

01-20-2001 90106 014 ***150.00

0314638

DOCUMENT # P93000029794

1. Entity Name
GJH CORPORATION

Principal Place of Business Mailing Address
~~20893 DEL LUNA DR~~
~~BOCA RATON FL 33433~~
7327 Viale Angelo
Delray Beach, FL 33446

00007137



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **65-0412454** Applied For
 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
HANDMAN, JEROME L
~~20893 DEL LUNA DR~~
~~BOCA RATON FL 33433~~

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PS** Delete
 NAME **HANDMAN, JEROME L**
 STREET ADDRESS ~~20893 DEL LUNA DR~~
 CITY-ST-ZIP ~~BOCA RATON FL 33433~~

Change Addition

TITLE **VT** Delete
 NAME **HANDMAN, GLORIA B**
 STREET ADDRESS ~~20893 DEL LUNA DR~~
 CITY-ST-ZIP ~~BOCA RATON FL 33433~~

Change Addition

TITLE **PS** Delete
 NAME **J L HANDMAN**
 STREET ADDRESS **7327 VIALE ANGELO**
 CITY-ST-ZIP **DELRAY BEACH FL 33446**

Change Addition

TITLE **VT** Delete
 NAME **Gloria Handman**
 STREET ADDRESS **7327 Viale Angelo**
 CITY-ST-ZIP **Delray Beach FL 33446**

Change Addition

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE Delete
 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: JEROME L. HANDMAN Date 1/8/01 Daytime Phone # 561/865-2055

CP2E034 (10/00)