FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jul 09, 2002 8:00 am Secretary of State DOCUMENT # P93000076752 1. Entity Name 07-09-2002 90374 021 ***150.00 JAKE & ASSOCIATES, INC. Principal Place of Business Mailing Address R0127697 8249 NW 14TH STREET 8249 NW 14TH STREET CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0446767 Not Applicable Zip Country Zíp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOWITT, STUART Street Address (P.O. Box Number is Not Acceptable) 441 S STATE RD 7 SUITE 15 MARGATE FL 33068 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. **\$5.00** May Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PΩ TITLE Delete TITLE ☐ Change Addition BERNER, JACOV NAME NAME 8249 NW 14TH STREET STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33071 CITY-ST-ZIP CITY-ST-ZIP D ☐ Delete TITLE ☐ Change ■ Addition NAMÉ BERNER, ALISON NAME STREET ADDRESS 8249 NW 14TH ST. STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS FL 33071 CITY-ST-7IP TITLE ☐ Delete TITLE ¬□'Change Addition NAME Lauten, Glenn NAME STREET ADDRESS 8249 NW 14TH ST. STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS FL 33071 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

The state of Florida Division of Corporations To:

FROM:

Jake & Associates, Inc.

To whom it may concern,

#P300007675) Today, July 1, 2002 we recieved unifrom business report form. We had previously sent this form in with a check for \$150 back in April, 2002. I have checked with my bank and have found that the check has not been

cashed so I can only assume that for whatever reason it was never received. Please accept my \$150 and second uniform business report.

I hope that you will find this satisfactory.

I can be reached at (954) 796-8458 for any questions that you may have.

Afforhmans

Thank you again.

Alison Berner