

# 2001 UNIFORM BUSINESS REPORT (UBR)

102

**DOCUMENT # P93000088749**

1. Entity Name  
**JAG REPAIRS, INC.**

FILED

01 OCT 12 PM 4:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**2461 N.W. 95TH AVE.  
CORAL SPRINGS FL 33065**

Mailing Address  
**2461 N.W. 95TH AVE.  
CORAL SPRINGS FL 33065**

*[Handwritten Signature]*



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number **65-0459556**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**LEVINE, BARBARA  
2461 N.W. 95TH AVE.  
CORAL SPRINGS FL 33065**

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 \_\_\_\_\_  
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 Tax filing requirement and elects to do so.   
(See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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>VSD LEVINE, BARBARA 2461 N.W. 95TH AVE. CORAL SPRINGS FL 33065</b> <input checked="" type="checkbox"/> Delete <i>DIED</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD LEVINE, MITCHELL 2461 N.W. 95TH AVE. CORAL SPRINGS FL 33065</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
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 <b>400004661804--3</b> <b>-11/01/01--01009--003</b> <b>****150.00 ****150.00</b>
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: *[Signature]* **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E034 (5/01)

Oct. 10, 2001

2001

Division of Corporation  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Florida. 32302-1500

*I'm writting this letter to let you know I did not recieve the UBR that was due before May.  
My wife and bookeeper died in Dec. leaving me with no one to take care of company papers.  
All corporate papers were going to another address to help me with my problem. It is possible it  
got lost in the mail. Please accept this check for the report for 2001.*

Thank you,



Mitchell Levine. Pres.  
Jag Repairs Inc.  
65-0459556