

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000009687

1. Entity Name

ON PRESS PRINTING, INC.

**FILED**  
**Jul 20, 2000 8:00 am**  
**Secretary of State**

07-20-2000 90015 001 \*\*\*150.00

Principal Place of Business

3903 NORTHDAL BLVD  
STE 124E  
TAMPA FL 33624  
US

Mailing Address

3903 NORTHDAL BLVD  
STE 124E  
TAMPA FL 33624  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3220708

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

7. Name and Address of New Registered Agent

JORDAN, GENE A JR.  
6901 ARABIAN RD  
ODESSA FL 33556

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 13, 2000 Min. 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPC  
NAME JORDAN, GENE A JR.  
STREET ADDRESS 6901 ARABIAN RD  
CITY-ST-ZIP ODESSA FL 33556 ☐ Delete

TITLE DPC  
NAME Jordan, Gene A JR.  
STREET ADDRESS 16311 Millan De Avila  
CITY-ST-ZIP Tampa, Fl. 33613 ☒ Change ☐ Addition

TITLE D  
NAME JORDAN, AMY  
STREET ADDRESS 6901 ARABIAN RD.  
CITY-ST-ZIP ODESSA FL 33556 ☐ Delete

TITLE D  
NAME Jordan, Amy  
STREET ADDRESS 16311 Millan De Avila  
CITY-ST-ZIP Tampa, Fl. 33613 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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

Date

Daytime Phone #

CR2E034 (5/00)

Attachment  
D#P940000908  
00072741

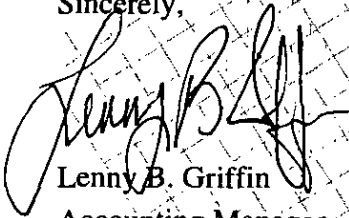
Florida Dept of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

07/14/00

Dear Sirs,

My company did not receive the 2000 Uniform Business Report from the state of Florida, before the May 31<sup>st</sup> due date. My company has been instructed by the state, to send the enclosed UBR, which was received 7/7/00 by US Mail. Upon speaking to the Office of Corporations, I am sending the enclosed form in good order, with the applicable fee of \$150.00

Sincerely,



Lenny B. Griffin  
Accounting Manager

WUBS