

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000063736

1. Entity Name
J.A.M. EUROPEAN AUTOWERKS, INC.

Principal Place of Business

1516 N. KELLEY AVE.
KISSIMMEE FL 34744

Mailing Address

1516 N. KELLEY AVE.
KISSIMMEE FL 34744

2. Principal Place of Business

1506 N. KELLEY AVE.
Suite, Apt. #, etc.

3. Mailing Address

1506 N. KELLEY AVE.
Suite, Apt. #, etc.

City & State
KISSIMMEE, FL.

Zip
34744

Country
USA

City & State
KISSIMMEE, FL

Zip
34744

Country
USA

4. FEI Number
59-3264035

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

COMPANA, JOE
1680 NEPTUNE RD.
KISSIMMEE FL 34744

7. Name and Address of New Registered Agent

Name
JOSEPH R. CAMPANA
Street Address (P.O. Box Number is Not Applicable)
1680 NEPTUNE RD.
City
KISSIMMEE FL 34744

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 *X @ Campana* ANGELO CAMPANA

DATE 1/4/02

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, 2002 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
CAMPANA, JOSEPH R
1680 NEPTUNE RD.
KISSIMMEE FL 34744 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
CAMPANA, ANGELO F
2266 CHARDONNAY COURT WEST
KISSIMMEE FL 34741 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
CAMPANA, GARY A
3225 FAIRHAVEN AVENUE
KISSIMMEE FL 34746 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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 is not on Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X @ Campana* ANGELO CAMPANA 407-847-7005

FILED
Jan 10, 2002 8:00 am
Secretary of State

01-10-2002 90009 025 ***150.00



DO NOT WRITE IN THIS SPACE

0656328
AV

CR2E034 (9/01)