

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 11, 2001 08:00 AM
Secretary of State

DOCUMENT # P94000066741

1. Entity Name
J & M MICRO INC.

Principal Place of Business
 3590 13TH AVE S.W.
 NAPLES FL 33964

Mailing Address
 3590 13TH AVE S.W.
 NAPLES FL 33964

2. Principal Place of Business
 3590 13TH AVE S.W.

3. Mailing Address
 3590 13TH AVE S.W.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 NAPLES FL

City & State
 NAPLES FL

4. FEI Number
65-0536047

Applied For
 Not Applicable

Zip Country
 34117

Zip Country
 34117

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

RUGANIS MICHAEL H
 3590 13TH AVE S.W.
 NAPLES FL 33964 US

Name
 RUGANIS MICHAEL J
 Street Address (P.O. Box Number is Not Acceptable)
 3590 13TH AVE S.W.
 City NAPLES FL Zip Code 34117

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 **MICHAEL J. RUGANIS**

03/11/2001

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 \$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 P Delete
 NAME RUGANIS MICHAEL J
 STREET ADDRESS 3590 13TH AVE S.W.
 CITY-ST-ZIP NAPLES FL 33964

TITLE P Change Addition
 NAME RUGANIS MICHAEL J
 STREET ADDRESS 3590 13TH AVE S.W.
 CITY-ST-ZIP NAPLES FL 34117

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: **Michael J. Ruganis**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P **03/11/2001**

Date

Daytime Phone #

CR2E034 (11/00)