

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 19, 2002 8:00 am
Secretary of State

09-19-2002 90157 041 ***150.00

DOCUMENT # *P95000030140*

1. Entity Name

J. K. Harward, INC.

DO NOT WRITE IN THIS SPACE

B0139460

2. Principal Place of Business

965 N Nobhill RD

Suite, Apt. #, etc.

PMB #104

City & State

Plantation FL

Zip

33324

Country

3. Mailing Address

965 N. Nobhill RD

Suite, Apt. #, etc.

PMB #104

City & State

Plantation FL

Zip

33324

Country

4. FEI Number

65-0574236

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

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

*Harward, Jay K.
1857 NW 99 Ave
Plantation FL*

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-13-02 954 4443712

Date

Daytime Phone #

CR2E034B (12/01)

Attachment

P950000 30140

to **Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302**

From **J. K. Harward INC.
965 N. Nobhill RD.
Plantation, FL 33324**

Gentlemen on April 15 2002 I sent a check for \$ 150.00 check # 2171 but as of September 12 2002 I had not received a cancelled check by my bank. In calling your office at (850) 488-9000 I found that my payment had not been received and a second notice had not been sent I was Instructed by your office staff to down load a copy of the (UBR) form and send it along with a new check.

**Thank You For Your Understanding
Jay Harward
J.K. Harward INC.**