

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000031247

1. Entity Name
J. BALBIER AND ASSOCIATES, INC.

9/21/01

Principal Place of Business

5420 NW. 122 DR
CORAL SPGS FL 33076

Mailing Address

5420 NW. 122 DR
CORAL SPGS FL 33076

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

02 JAN 07 PM 4:28



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0591438

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BALBIER, JAMIE
5420 NW. 122 DR
CORAL SPGS FL 33076

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.

JAMIE BALBIER (NOTE: Registered Agent signature required when reinstating)

12/27/01 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 D ☐ Delete
NAME BALBIER, JAMIE
STREET ADDRESS 5420 NW 122 DR
CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE S ☐ Delete
NAME BALBER, SHEILA
STREET ADDRESS 5420 NW 122 DR
CITY-ST-ZIP POMPANO BEACH FL 33076

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition
700004764977-0
-01/10/02--01040--029
****208.75 ****208.75

S ☒ Change ☐ Addition
NAME BALBIER, SHEILA
STREET ADDRESS 5420 NW 122 DR
CITY-ST-ZIP CORAL SPRINGS, FL 33076

☐ Change ☐ Addition
700004764977-0
-01/10/02--01040--028
****150.00 ****150.00

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

☐ Change ☐ Addition
700004764977-0
-01/10/02--01040--030
****550.00 ****550.00

☐ 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JAMIE BALBIER 10/14/01 954-796-3334

Date Daytime Phone #

CR2E034 (5/01)