

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000037564

1. Entity Name
MV J.T., INC.

FILED
Jan 18, 2001 8:00 am
Secretary of State

01-18-2001 90008 045 ***158.75

Principal Place of Business
PO BOX 2542
KEY WEST FL 33045-2542

Mailing Address
PO BOX 2542
KEY WEST FL 33045-2542

603781



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3360 Riviera Drive
Suite, Apt. #, etc.
Key West, FL
City & State

3. Mailing Address
P.O. Box 2542
Suite, Apt. #, etc.
City & State
Key West, FL 33045-2542

4. FEI Number 65-0593305
Applied For
Not Applicable

Zip
33040

Country
USA

Zip

Country
USA

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 Jeanette T. Cooper

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Jan. 9, 2001
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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
0	COOPER, SAMUEL S	3360 RIVIERA DR	KEY WEST FL 33040	<input type="checkbox"/>
0	COOPER, JEANETTE T	3360 RIVIERA DR	KEY WEST FL 33040	<input type="checkbox"/>
0	TOOMER, RICHARD E	1220 19TH TERR	KEY WEST FL 33040	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Jeanette T. Cooper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 8, 2000 305-296-2149
Date Daytime Phone #

CR2E034 (10/00)