2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000052341

Entity Name

J & D FAMILY ENTERPRISES, INC.

changed, or on an attachment with an

SIGNATURE

Mailing Address Principal Place of Business 2801 NORTH 38TH AVENUE 2801 NORTH 38TH AVENUE OIIII HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-3009 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0593341 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STOODLEY, ANDREA M Street Address (P.O. Box Number is Not Acceptable) 2801 NORTH 38TH AVENUE HOLLYWOOD FL 33021 Zip Code City FI 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5,00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. **PSD** ☐ Change ☐ Addition TITLE TITLE Delete STOODLEY, ANDREA M NAME NAME STREET ADDRESS STREET ADDRESS 2801 NORTH 38TH AVENUE CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Change ☐ Addition TITLE ☐ Delete TITLE STOODLEY, JAMES J NAME NAME STREET ADDRESS STREET ADDRESS 2801 NORTH 38TH AVENUE CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 reservice 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Mar 03, 2000 8:00 am Secretary of State

03-03-2000 90201 036 ***150.00