

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000076046

1. Entity Name
BOCA-JAX, INC.

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90169 042 ***150.00

Principal Place of Business 189 SAN JUAN DR. PONTE VEDRA BEACH FL 32082	Mailing Address 189 SAN JUAN DR. PONTE VEDRA BEACH FL 32082
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2. Principal Place of Business 6353 W. ROGERS CIRCLE SUITE #1	3. Mailing Address P.O. Box 273760
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City & State BOCA RATON, FL	City & State BOCA RATON, FL
Zip 33487	Country USA
Zip 33427	Country USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3342479	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAHAMOVITCH, HARRY 6353 W ROGERS CR STE #1 BOCA RATON FL 33487	
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. (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
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS HAHAMOVITCH, HARRY 6353 W ROGERS CR, STE 1 BOCA RATON FL 33487 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAHAMOVITCH, HARRY H 6353 W ROGERS CIR., STE. 1 BOCA RATON FL 33487 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: President 4-11-01 561-994-2233
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: HARRY HAHAMOVITCH Date Daytime Phone #

CR2E034 (10/00)