

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000080284

1. Entity Name
S J & J HOBBIES, INC.

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90104 007 ***150.00

Principal Place of Business Mailing Address
616 S.E. 10 ST 616 S.E. 10 ST
DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441-5628

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 65-0625994 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AUGUSTUS, SUSAN D
9360 KETAY CR.
BOCA RATON FL 33428

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 _____ (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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME AUGUSTUS, STEPHEN D
STREET ADDRESS 854 E. JEFFREY ST.
CITY-ST-ZIP BOCA RATON FL 33487 ☐ Delete

TITLE P
NAME AUGUSTUS, STEPHAN D.
STREET ADDRESS 3301 S. OCEAN DRIVE
CITY-ST-ZIP BOCA RATON, FL 33487 ☒ Change ☐ Addition

TITLE VP
NAME PLATT, JEFFREY
STREET ADDRESS 14897 BALMORAL LN #204
CITY-ST-ZIP DELRAY BEACH FL 33446 ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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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: Stephan D. Augustus Stephan D. AUGUSTUS 1-9-00 954-428-9118
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)