

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000083200

1. Entity Name

J & M ENTERPRISES OF BROWARD COUNTY, INC.

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90033 040 ***150.00

Principal Place of Business

7534 GRANVILLE DRIVE
TAMARAC FL 33321

Mailing Address

7534 GRANVILLE DRIVE
TAMARAC FL 33321-8736

80007611

2. Principal Place of Business

10230 BROOKVILLE LANE

3. Mailing Address

10230 BROOKVILLE LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOCA RATON FL

City & State

BOCA RATON FL

4. FEI Number

65-0639010

Applied For

Not Applicable

Zip

33428

Country USA

PALM BEACH

Zip

33428

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BEGLEY, MARTIN J
7534 GRANVILLE DR
TAMARAC FL 33321

7. Name and Address of New Registered Agent

Name

MARTIN J. BEGLEY

Street Address (P.O. Box Number is Not Acceptable)

10230 BROOKVILLE LANE

City

BOCA RATON

FL

Zip Code

33428

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

Martin J Begley

Signature, typed or printed name of registered agent and file 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, 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

TITLE D
NAME BEGLEY, MARTIN J
STREET ADDRESS 7534 GRANVILLE DRIVE
CITY-ST-ZIP TAMARAC FL 33321 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 10230 ~~65A~~ BROOKVILLE LANE
CITY-ST-ZIP BOCA RATON FL 33428 ☒ Change ☐ Addition

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

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

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

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

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:

Martin J Begley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #