

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P95000097545**

1. Entity Name

JEN PARK, INC.**FILED**
Jun 20, 2001 8:00 am
Secretary of State

05-31-2001 90006 003 ***150.00

Principal Place of Business

Mailing Address

2717 W CYPRESS CREEK RD
SUITE 500
FT LAUDERDALE FL 33309
US2717 W CYPRESS CREEK RD
SUITE 500
FT LAUDERDALE FL 33309
US

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 **59-3361301**

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

CANTOR, SAMUEL J
6700 BROKEN COUNDRY PKWY NW
STE 200
BOCA RATON FL 33487

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.

(NOT)

Registered Agent's 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**
After MAY 1, 2001
Make Check Payable**1. FEE IS \$150.00**
Fee will be \$550.00
to Department of State10. 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	D	☐ Delete
NAME	ROSE, STEVEN G	
STREET ADDRESS	2717 W CYPRESS CREEK RD	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	
TITLE	D	☒ Delete
NAME	STICKLES, PHILIP	
STREET ADDRESS	2717 W CYPRESS CREEK RD	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	
TITLE	D	☒ Delete
NAME	HOOD, KAREN	
STREET ADDRESS	2717 W CYPRESS CREEK RD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	☐ Change ☒ Addition
NAME	Parker, David L	
STREET ADDRESS	2717 W Cypress Creek Rd	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
TITLE	D	☐ Change ☒ Addition
NAME	Jennifer Halikman	
STREET ADDRESS	2717 W Cypress Creek Rd	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
TITLE	D	☐ Change ☒ Addition
NAME	Christine Lo	
STREET ADDRESS	2717 W Cypress Creek Rd	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 I am an officer or director of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (10/00)