2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

SUITE C

1700 W KING STREET. SR 520

DOCUMENT # P9600005122

1. Entity Name

Principal Place of Business

1700 W KING STREET, SR 520

J & S ENTERPRISES GROUP, INC.

FL 32926		COCOA FL 32926-5124 US		i regulari din renda birili kalih katik deli		(B-2(0) +00)	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE	N THIS SPACE		
City & State		City & State		4. FEI Number 59-3353380		plied For t Applicable	
Zip '	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Addi		
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Reg	stered Agent		
343	GEL-8-UTRERA, P.A. ALMERIA AVENUE AL GABLES FL 33134		Street Address City Oran	Street Address (P.O. Vox Number is Not Acceptable) 622 Chambers Way City Orange City FL Zip Code 32763			
SIGNATURE	e named entity submits this statement for Teffrey Ferrar Signature, typed or printed name of registered agent a oration is eligible to satisfy its Intangible requirement and elects to do so.	President (NOTE) Inditite if applicable. (NOTE)	registered office or regis	tered agent, or both, in the State of Florid Florid When reinstaling) 10. Election Campaign Finance	a. //2/00 DATE cing \$5.00	0 May Be	
			le to Department of S	tate		to Fees	
11.	OFFICERS AND	_ 	12.	ADDITIONS/CHANGES TO OFFICE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FERRARA, JEFFREY J 1700 W KING STREET, SR 520, S COCOA FL 32926		TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DEJOY, EUGENE R 1700 W KING ST., SR 520, SUITI COCOA FL 32926	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
TITLE		☐ Delete	TITLE		☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	. TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
indicated of the cor	l on this report or supplemental report is	true and accurate and that movered to execute this report :	ny signature shall have th as required by Chapter 6	Section 119.07(3)(i), Florida Statutes, I fu le same legal effect as if made under oat 007, Florida Statutes; and that my name a	h: that I am an officer	of director 1	

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FILED

Apr 18, 2000 8:00 am Secretary of State

04-18-2000 90263 042 ***158.75