

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90806 037 \*\*\*150.00

0006906 AT

**DOCUMENT # P96000009022**

1. Entity Name

FLORIDA RARE COINS AND COLLECTIBLES, INC.



Principal Place of Business

1016 E. LAS OLAS BLVD.

FT. LAUDERDALE FL 33301

Mailing Address

1016 E. LAS OLAS BLVD.

FT. LAUDERDALE FL 33301

10095314



2. Principal Place of Business

2910 Oakwood Blvd.

3. Mailing Address

2910 Oakwood Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

Hollywood FL

City & State

Hollywood FL

4. FEI Number

65-0632186

Applied For

Not Applicable

Zip

33020

Country

USA

Zip

33020

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARRIS, KEVIN

1016 E. LAS OLAS BLVD.

FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

Kevin Harris

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

2910 Oakwood Blvd.

City

Hollywood

FL

Zip Code

33020-7122

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME HARRIS, KEVIN  
STREET ADDRESS 12520 COUNTRYSIDE TERRACE  
CITY-ST-ZIP COOPER CITY FL 33390

TITLE V ☐ Delete  
NAME JORDAN, LARRY  
STREET ADDRESS 115 MELANIE CIRCLE  
CITY-ST-ZIP FAIRVIEW GA 30213

TITLE ST ☒ Delete  
NAME JENSEN, WAYNE  
STREET ADDRESS 1800 AVENIDO SOLANO  
CITY-ST-ZIP ROSEVILLE CA 95747

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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CITY-ST-ZIP

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03

Date

954-445-7863

Daytime Phone #

CR2E034 (10/02)