

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000031285

1. Entity Name

JEREN FOLIAGE DESIGNS, INC.

FILED

Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90296 015 ***150.00

Principal Place of Business

3350 NORTH 57TH DRIVE
HOLLYWOOD FL 33021

Mailing Address

1440 JOHN F KENNEDY CSWY
301
N BAY VILLAGE FL 33141

2. Principal Place of Business

3. Mailing Address

3350 N. 57th Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Hollywood, FL.

Zip

Country

Zip

Country

33021

usa

4. FEI Number 65-0657834

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

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.

(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, 2001 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 PSTD
NAME BATTAGLIA, JEFFREY W
STREET ADDRESS 2215 NORTH 41ST AVENUE
CITY-ST-ZIP HOLLYWOOD FL 33021

☐ Delete

TITLE PSTD
NAME Battaglia, Jeffrey W
STREET ADDRESS 11036 SW 40th Ct.
CITY-ST-ZIP DAVIE, FL. 33328

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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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:

Jeff Battaglia
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-01

Date

305 861 2766

Daytime Phone #

CR2E034 (10/00)