

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000043201

1. Entity Name
JEBCO INTERNATIONAL, INC.

FILED

02 JUN 21 AM 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
100 SE SECOND STREET
SUITE 4000
MIAMI FL 33131
US

Mailing Address
100 SE SECOND STREET
SUITE 4000
MIAMI FL 33131
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

65-0835385

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

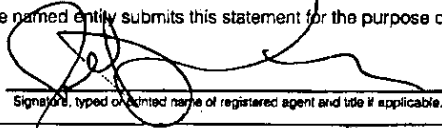
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRAUTMAN, EILEEN
100 SE SECOND STREET
SUITE 4000
COCONUT GROVE FL 33131

Name: CERA, LLC
Street Address (P.O. Box Number is Not Acceptable): ONE HARBOUR PLACE
777 S. HARBOUR ISLAND Boulevard
City: Tampa FL Zip Code: 33602

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.

Peter J. Winders

April 22, 2002

(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, 2002 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: D
NAME: FETTER, HOWARD
STREET ADDRESS: 6395 COTE DE LIESSE
CITY-ST-ZIP: MONTEAL QUEBEC H4T 1E5

TITLE: ☐ Delete
NAME: ☐ Change ☐ Addition
STREET ADDRESS: 100006535001--8
CITY-ST-ZIP: -07/19/02--01064--032

TITLE: ☐ Delete
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ****150.00 ****150.00

TITLE: ☐ Delete
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STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Delete
NAME: ☐ Change ☐ Addition
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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:  April 18, 2002

CR2E034 (9/01)