

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000048072

1. Entity Name
KJP PINELLAS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN 15 AM 11:33

Principal Place of Business Mailing Address
2851 WEATHERSFIELD CT 2851 WEATHERSFIELD CT
CLEARWATER FL 33761 CLEARWATER FL 33761-3012
US US



DO NOT WRITE IN THIS SPACE

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 **59-3387415** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
IJJAS, JOSEPH Z
2851 WEATHERSFIELD CT
CLEARWATER FL 34821

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 _____ (NOTE: Registered Agent signature required when re-stating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

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, 2000 Fee will be \$50.00
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		<input type="checkbox"/> Delete
TITLE	VPS	<input type="checkbox"/> Delete
NAME	IJJAS, KATHY	
STREET ADDRESS	2851 WEATHERSFIELD CT	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	PT	<input type="checkbox"/> Delete
NAME	IJJAS, JOSEPH Z	
STREET ADDRESS	2851 WEATHERSFIELD CT	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> 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)(l), 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: *Joseph Z. IJJAS* **JOSEPH Z. IJJAS** 6/13/00 727-797-5074
Joseph Z. IJJAS **JOSEPH Z. IJJAS** 3/27/00 727-797-5074
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

Doc# : P94000048072

KJP PINELLAS, INC.
2851 Weathersfield Ct.
Clearwater, Florida 33761

June 13, 2000

Florida Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Attn: Reinstatements

Subject: KJP Pinellas, Inc.
59-3387415

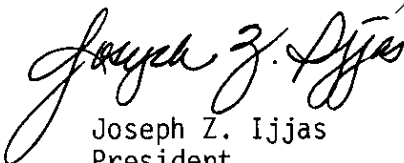
Dear Sir or Madam:

I had originally completed the 2000 Uniform Business Report on March 27, 2000 and had mailed the form with a check for the filing fee of \$150.00. When the check had not posted to my subsequent bank statements, I called your office to check on receipt of the Report. Stacy advised that the Report had not been received.

At her suggestion, I am forwarding to you a photocopy of the original Report, with an original signature and a new check payable to Department of State in the amount of \$150.00.

Thank you for your help in this matter.

Sincerely,



Joseph Z. Ijjas
President
KJP Pinellas, Inc.