## **UNIFORM BUSINESS REPORT (UBR)**

## **2003 FOR PROFIT CORPORATION** P96000052416 DOCUMENT # 1. Entity Name

J & J LAMAR CONSTRUCTION SERVICES, INC.



**FILED** Apr 17, 2003 8:00 am Secretary of State

04-17-2003 90187 005 \*\*\*150.00

| Principal Place of Business<br>2166 NW 30TH TER<br>FT LAUDERDALE FL 33311  |  |                              |                  | Mailing Address<br>2166 NW 30TH TER<br>FT LAUDERDALE FL 33311 |                   |               |  |               |                                     |              |          |                        |                             |
|--|--|------------------------------|------------------|---|-------------------|---------------|--|---------------|-------------------------------------|--------------|----------|------------------------|-----------------------------|
| 2. Principal Place of Business   |  |                              |                  | 3. Mailing Address  |                   |               |  |               |                                     |              |          |                        |                             |
| Suite, Apt. #, etc.  |  |                              |                  | Suite, Apt. #, etc.   |                   |               |  |               | ☐ CHECK                             | HERE IF M    | IAKING ( | CHANGES                |                             |
| City & State   |  |                              |                  | City & State  |                   |               |  | 4. FEI        | Number <b>65-068</b>                | 4121         |          |                        | oplied For<br>ot Applicable |
| Zip  | С  | ountry                       | Zip              | Zip Cou   |                   |               |  | <b>5.</b> Cer | tificate of Status De               | sired [      |          | 8.75 Add<br>se Require |                             |
|  |  |                              |                  | 7. Nan  | ne and Address of | New Regis     | tered Ag   | ent           |                                     |              |          |                        |                             |
|  |  |                              |                  |   |                   | Name          |  |               |                                     | _*           | _        |                        |                             |
| LAMAR, JOHNNY JR   |  |                              |                  |   |                   |               | Street Address (P.O. Box Number is Not Acceptable) |               |                                     |              |          |                        |                             |
| 2166 NW 30TH TER   |  |                              |                  |   |                   |               |  |               |                                     |              |          |                        |                             |
| FT LAUDERDALÉ FL 33311   |  |                              |                  |   |                   |               |  |               |                                     |              |          | I                      |                             |
|  |  |                              |                  |   |                   | City          |  |               |                                     |              | FL       | Zip Code               | e                           |
|  | e named entity sub<br>tions of registered        |                              | or the purp      | oose of changing its  | registere         | ed office or  | registered   | l agent,      | , or both, in the Stat              | e of Florida | l am far | miliar with,           | and accept                  |
| SIGNATURE .  | Simple Annual Control                            | ited name of registered agen |                  | -E  | . Daminton        |               | )  |               |                                     |              | DATE     |                        |                             |
| <u>.                                    </u>   |  | ) ' ÷ .                      | and title if app | T (NOTE   | :: Hegistered     | Agent signatu | ire required wn                                    | nen reinsta   | ating)                              |              | 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 Campa<br>Trust Fund Con |              | ng 🗆     | <b>\$5.0</b><br>Added  | <b>0</b> May Be<br>to Fees  |
| 10.  |  | OFFICERS AND                 | DIRECTO          | DIRECTORS 11.   |                   |               | ·  | ADDIT         | TONS/CHANGES T                      | O OFFICE     | RS AND D | IRECTORS               | S IN 11                     |
| NAME STREET ADDRESS CITY-ST-ZIP  | D<br>LAMAR, JOHN<br>2166 NW 30TI<br>FT LAUDERDA  | H TER 😁                      |                  | ☐ Delete  |                   |               |  |               | -                                   | _            | [        | Change                 | ☐ Addition                  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | D<br>LAMAR, JIMM'<br>2166 NW 30TI<br>FT LAUDERDA | H TER                        |                  | □ Delete  |                   |               |  |               |                                     |              | [        | Change                 | Addition                    |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |  |                              |                  | ☐ Delete  |                   |               |  | ·• t          | -                                   | <del>-</del> |          | Change                 | ☐ Addition                  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |  |                              |                  | ☐ Delete  |                   |               |  |               |                                     |              |          | Change                 | Addition                    |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |  |                              |                  | ☐ Delete  |                   |               |  |               |                                     | _            | [        | ☐ Change               | Addition                    |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP  |  |                              |                  | ☐ Delete  |                   |               |  |               |                                     |              | [        | Change                 | Addition                    |

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.