

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000068270

1. Entity Name

JIREH UNLIMITED, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90289 012 ***150.00

Principal Place of Business

Mailing Address

S. NOVA RD.
K-1107
DAYTONA FL 32119

2090 S. NOVA RD
SUITE K-1107
S. DAYTONA FL 32119-8834
US

2. Principal Place of Business

1500 Beville Rd

Suite, Apt. #, etc.

Ste 606

City & State

Daytona Bch Fl.

Zip

32114-5644

Country

USA

3. Mailing Address

1500 Beville Rd

Suite, Apt. #, etc.

Ste 606

City & State

Daytona Bch Fl.

Zip

32114-5644

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3396049

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)

2964 Carriage Drive

City

So. Daytona

FL

Zip Code
32119

FLORES, CHANDRA A

2090 S Nova Rd Ste K-1107

S. Daytona Fl. 32119

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)

☒ X

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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 ☐ Delete

NAME FLORES, JAMES M

STREET ADDRESS 2090 S Nova RD

CITY-ST-ZIP S. Daytona Fl.

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS 1500 Beville Rd Ste 606

CITY-ST-ZIP Daytona Bch Fl. 32114-5644

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ 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)(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:

James Flores

Pres

3-29-00

904-756-0083

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)