**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 11, 2002 8:00 am P96000097781 DOCUMENT # **Secretary of State** 1. Entity Name 02-11-2002 90116 017 \*\*\*150.00 J & H PAVING, INC. Mailing Address Principal Place of Business 1417 10TH ST. W. 1417 10TH ST. W. RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0712061 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HERRING, MERRY Street Address (P.O. Box Number is Not Acceptable) 1417 10TH ST. W. **RIVIERA BEACH FL 33404** 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change TITLE TITLE ☐ Delete HERRING, COY J NAME NAME 1417 10TH ST. W. STREET ADDRESS STREET ADDRESS **RIVIERA BEACH FL 33404** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE HERRING, MERRY NAME NAME AAAR AOTU CT W STREET ADDRESS THAT IS THE WORLD IN CONTRACT TO SOME CHY-SI-ZIP Change ■ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

Jan 24, 2:002

CR2E034 (9/01)