

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90063 005 ***150.00

DOCUMENT # P97000005191

1. Entity Name
JACKIE J. ENTERPRISES, INC.

Principal Place of Business
465 FERNANDINA ST
STE 12
FT PIERCE FL 34949
US

Mailing Address
465 FERNANDINA ST
STE 12
FT PIERCE LF 34949
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3435439

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHN, MARGARET D
465 FERNANDINA ST
STE 12
FT PIERCE FL 34949

Name
RICHARD H. JOHN
 Street Address (P.O. Box Number is Not Acceptable)
465 Fernandina Street
STE 12
 City
FT. PIERCE **FL** Zip Code
34949

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.

Richard H. John - President

SIGNATURE *Richard H. John* **03-02-2002**
 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) ☐

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P
JOHN, M D
465 FERNANDINA ST, 12
FT PIERCE LF 34949

TITLE
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☐ Change ☐ Addition

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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.

Richard H. John - President

SIGNATURE: *Richard H. John*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-02-2002 561-460-5445
 Date Daytime Phone #

CR2E034 (9/01)