## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR**

## P97000012163 DOCUMENT #



May 05, 2003 8:00 am & Secretary of State 05-05-2003 92199 036 \*\*\*150.00

**FILED** 

1. Entity Name JEN TECHNOLOGY, INC.

12549 NW 56 DRIVE		Mailing Address 12549 NW 56 DRIVE CORAL SPRINGS FL 33076		,			
2. Principal Place of Business		3. Mailing Address		1 (105)(101) (10 (10))(100)(100)(100)(100)(100		.{{ <b>0 0</b> 110} 1 <b>000</b> 1 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 65-0725072		oplied For of Applicable
Zip	Country	Zip	Country			3.75 Add	
	6. Name and Address of Current R	egistered Agent			7. Name and Address of New Registered Age	ent	
			Name	Name			
NINO, JOI	RGE		Street Address		(P.O. Box Number is Not Acceptable)		
12549 NW							
CORAL SPRINGS FL 33076							
1			City		FL	Zip Code	e
	e named entity submits this statement for tions of registered agent.	the purpose of changing its	registered office	or register	ed agent, or both, in the State of Florida. I am fam	iliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent an	d title 2 one Early (NOT	- Davistand Accession		) when reinstating) DATE		
		d title ii applicable. (NOTE	E: Registered Agent sign	iature reduireo	when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00						\$5:0	<b>О</b> -мау ве
ke Chec	k Payable to Florida Department of	State			Trust Fund Contribution.	Added	I to Fees
	OFFICERS AND D		11.		ADDITIONS/CHANGES TO OFFICERS AND DI	RECTOR	
"TITLE	PSTD	☐ Delete	TITLE		L.	] Change	☐ Addition
NAME STREET ADORESS	NINO, JORGE E 12549 NW 56 DRIVE		NAME STREET ADDRESS				
CITY-ST-ZIP	CORAL SPRINGS FL 33076		CITY-ST-ZIP				
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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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP