

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000032968

1. Entity Name
L & J CALIBRATIONS, INC.



FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90088 030 ***150.00

Principal Place of Business
1681 SE 4TH COURT
DEERFIELD BEACH FL 33441
US

Mailing Address
265 S FEDERAL HWY
304
DEERFIELD BEACH FL 33441
US

2. Principal Place of Business

3. Mailing Address
1681 SE 4th CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Deerfield Beach, FL

4. FEI Number 65-0744657

Applied For
Not Applicable

Zip

Country

Zip
33441

Country
USA

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

GIUFFRIDA, JOHN
1681 SE 4TH COURT
DEERFIELD BEACH FL 33441

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
GIUFFRIDA, JOHN
1681 SE 4TH COURT
DEERFIELD BEACH FL 33441 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
LOVE, LINDA
1681 SE 4TH COURT
DEERFIELD BEACH FL 33441 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ 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.

SIGNATURE:

John Giuffrida
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/03

800-747-3883

Date

Daytime Phone #

CR2E034 (10/02)