

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2002 8:00 am
Secretary of State

04-03-2002 90189 043 ***150.00

0381879 AV

DOCUMENT # P97000048131

1. Entity Name
JGB & COMPANY, INC.

Principal Place of Business
8470 S MIZZEN DRIVE
BOYNTON BEACH FL 33437

Mailing Address
8470 S MIZZEN DRIVE
BOYNTON BEACH FL 33437



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4186 48th Ave S

3. Mailing Address

4186 48th Ave S

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Saint Petersburg, FL

Saint Petersburg, FL

City & State

City & State

4. FEI Number

65-0756133

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

Zip **33711**

Country **U.S.A.**

Zip **33711**

Country **U.S.A.**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOCHIS, JAMES G II
8470 S MIZZEN DRIVE
BOYNTON BEACH FL 33437

Name

James G Bochis II

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

4186 48th Ave S

City

St Petersburg

FL

Zip Code

33711

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]

James G. Bochis II

3/25/02

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 **PD** ☐ Delete
NAME **BOCHIS, JAMES G II**
STREET ADDRESS **8470 S MIZZEN DRIVE**
CITY-ST-ZIP **BOYNTON BEACH FL 33437**

TITLE ☒ Change ☐ Addition
NAME **James G Bochis II**
STREET ADDRESS **4186 48th Ave S**
CITY-ST-ZIP **Saint Petersburg FL 33711**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James G. Bochis **3/25/02** **727-864-9382**
Date Daytime Phone #

CR2E034 (9/01)