## 2002 UNIFORM BUSINESS REPORT (UBR)

**SIGNATURE:** 

2002 UNIFORM BUSINESS REPORT (UBR)							FILED				
DOCUMENT # P97000052096					Feb 26, 2002 8:00 Secretary of Sta					U am ate	
JNW OF	CENTRAL	FLORIDA, INC.						02 90165 0			
Principal Place of Business 1849 DANIELS ST. KISSIMMEE FL 34746			Mailing Address  1849 DANIELS ST. KISSIMMEE FL 34746				( 1884)881 NG (8N) (88N 88N	1 <b>11</b> (1) <b>16</b> (1) <b>11(1)</b>	Olico (1811 Selico	1811 <b>9 8</b> 111 1 <b>99</b> 1	
2. Principal F	Place of Busine	ess	3. Mailing Address	. "************************************							
Suite, Apt.	#, etc.	]	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & Stat			<b>4.</b> F	El Number <b>59-34524</b>	<u></u>	_ <del> </del>	polied For				
Zip Country			Zip	Zip Country		<b>5.</b> C	ertificate of Status Desired		\$8.75 Add		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
MEI OIL	100EBU 11			Nan	ne				-		
WELSH, JOSEPH N 1849 DANIELS ST.				Street Address			ox Number is Not Accepta	ıble)			
KISSIMMEE FL 34746											
				City				FL	Zip Code	е	
8: The above	named entity	submits this statement for	the purpose of changing its	registered offic	ce or register	red age	ent, or both, in the State of	Florida.			
CIONATURE											
SIGNATURE	Signature, typed o	r printed name of registered agent a	nd title if applicable. (NOTE	E: Registered Agent s	signature required	d when rei	nstating)	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!!  After May 1, 2002  Make Check Payable					e \$550.00	te	10. Election Campaign Trust Fund Contribu			O May Be I to Fees	
11.		OFFICERS AND I		12.			DITIONS/CHANGES TO C	FFICERS AND	DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS	D WELSH, JO 1849 DANI		☐ Delete	TITLE NAME STREET ADDR	ESS				☐ Change	☐ Addition	
CITY-ST-ZIP		E FL 34746		CITY-ST-ZIP							
TITLE NAME	D Welsh, S	USAN F	☐ Delete	TITLE NAME					Change	Addition	
STREET ADDRESS CITY-ST-ZIP	1849 DANI			STREET ADDR	ESS						
TITLE	KIOOIMIME	LILOTITO	☐ Delete	TITLE		···			☐ Change	Addition	
NAME STREET ADDRESS				NAME STREET ADDR	ESS						
CITY-ST-ZIP TITLE			☐ Delete	CITY-ST-ZIP					☐ Change	☐ Addition	
NAME			☐ Delete	NAME					ondrige	Addition	
STREET ADDRESS CITY-ST-ZIP				STREET ADDRI	ESS						
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TITLE			☐ Delete	TITLE					Change	Addition	
NAME STREET ADDRESS				NAME STREET ADDRI	ESS						
CITY-ST-ZIP				CITY-ST-ZIP						-	
indicated	on this report	or supplemental report is:	this filing does not qualify for true and accurate and that n wered to execute this report ith all other like ampoweged.	ny sionature sh	all have the s	same le	egal effect as if made und	er oath: that La	m an officer.	or director	