

2002 UNIFORM BUSINESS REPORT (UBR)

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

03-25-2002 90122 008 ***150.00

DOCUMENT # P97000059228

1. Entity Name

JIMMY IMPERIAL & SON, INC.

Principal Place of Business

**606 SW 21ST STREET
 CAPE CORAL FL 33991**

Mailing Address

**606 SW 21ST STREET
 CAPE CORAL FL 33991**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0764931

Applied For

Not Applicable

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

**SW PROFESSIONAL SERVICES OF FT. MYERS, INC SO. FL, INC.
 13571 MCGREGOR BLVD #22
 FT. MYERS FL 33919**

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.

SIGNATURE

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 ☐ Delete
 NAME **PD**
 STREET ADDRESS **IMPERIAL, JAMES**
 CITY-ST-ZIP **1202 SW 9TH AVE
 CAPE CORAL FL 33991**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ 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.

SIGNATURE:

JAMES IMPERIAL
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-02

Date

941-574-0018

Daytime Phone #

CR2E034 (9/01)

Attachment

#P97000059228
749793

TAX TRANSMITTAL MEMO

*Genius Imperial
& Son, Inc.*

The attached form is your: **FLORIDA CORPORATION ANNUAL REPORT**

You should file this now although it will not be delinquent until May 1st.

If you fail to file this form, you will receive a reminder. If you still do not file, **YOUR CORPORATION WILL BE DISSOLVED BY THE STATE. REINSTATEMENT IS EXPENSIVE.**

SIGN THE TAX FORM, MAKE YOUR CHECK FOR \$ 150.00 payable to SECRETARY OF STATE and mail to: Division of Corporations, Annual Reports Section, P.O. Box 1500, Tallahassee, FL 32302-1500 in the enclosed envelope.

Return this to us. Date Paid 3-11-02 Check # 1290