

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 23, 2003 8:00 am**  
**Secretary of State**

04-23-2003 90303 040 \*\*\*150.00

<b>DOCUMENT #</b> <i>P97000077242</i>	
<b>1. Entity Name</b> JOGO, INC. d/b/a Sweet Things	

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**90102612**

<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc. 801 S. University Drive, #C138		Suite, Apt. #, etc. 801 S. University Drive, #C138	
City & State Plantation, FL		City & State Plantation, FL	
Zip 33324	Country USA	Zip 33324	Country USA

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<b>DO NOT WRITE IN THIS SPACE</b>		<b>4. FEI Number</b> 65-0780590		<b>Applied For</b> Not Applicable	
		<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
<b>7. Name and Address of Current Registered Agent</b>					
Name Rutsky, Jack					
Street Address (P.O. Box Number is Not Acceptable) 9100 NW 12th Street					
City Plantation					
State FL					
Zip Code 33322					

**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

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

**9. Election Campaign Financing**  
Trust Fund Contribution.

**\$5.00 May Be**  
Added to Fees

<b>10. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b> P	<b>NAME</b> Rutsky, Jack	<b>TITLE</b>	<b>NAME</b>
<b>STREET ADDRESS</b> 9100 NW 12th Street	<b>STREET ADDRESS</b> 9100 NW 12th Street	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>
<b>CITY - ST - ZIP</b> Plantation, FL 33322	<b>CITY - ST - ZIP</b> Plantation, FL 33322	<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>
<b>TITLE</b> D	<b>NAME</b> Rutsky, Julius	<b>TITLE</b>	<b>NAME</b>
<b>STREET ADDRESS</b> 2560 NW 103 Street	<b>STREET ADDRESS</b> 2560 NW 103 Street	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>
<b>CITY - ST - ZIP</b> Sunrise, FL 33322	<b>CITY - ST - ZIP</b> Sunrise, FL 33322	<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>
<b>TITLE</b> V	<b>NAME</b> Rutsky, Maureen	<b>TITLE</b>	<b>NAME</b>
<b>STREET ADDRESS</b> 9100 NW 12th Street	<b>STREET ADDRESS</b> 9100 NW 12th Street	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>
<b>CITY - ST - ZIP</b> Plantation, FL 33322	<b>CITY - ST - ZIP</b> Plantation, FL 33322	<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>
<b>TITLE</b> D	<b>NAME</b> Rutsky, Roslyn	<b>TITLE</b>	<b>NAME</b>
<b>STREET ADDRESS</b> 2560 NW 103 Street	<b>STREET ADDRESS</b> 2560 NW 103 Street	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>
<b>CITY - ST - ZIP</b> Sunrise, FL 33322	<b>CITY - ST - ZIP</b> Sunrise, FL 33322	<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>
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<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>
<b>TITLE</b>	<b>NAME</b>	<b>TITLE</b>	<b>NAME</b>
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<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>	<b>CITY - ST - ZIP</b>

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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 807, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #