

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2002 8:00 am
Secretary of State

03-24-2002 90005 013 ****61.25

04-28-2002 90576 027 ****88.75

DOCUMENT # P98000000475

1. Entity Name

J. FRANCO, INC.

Principal Place of Business

90 ALTON ROAD
 #1908
 MIAMI FL 33139

Mailing Address

90 ALTON ROAD
 #1908
 MIAMI FL 33139

2. Principal Place of Business

90 Alton Rd
 Suite, Apt. #, etc.
 #1908

3. Mailing Address

90 Alton Rd
 Suite, Apt. #, etc.
 #1908

City & State

Miami Beach FL

City & State

Miami Beach FL

Zip

33139

Country

Miami-Dade

Zip

33139

Country

Miami-Dade

4. FEI Number

65-0817929

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

5. Name and Address of Current Registered Agent

FRANCO, JACK
 90 ALTON ROAD
 MIAMI FL 33139

7. Name and Address of New Registered Agent

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

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

TITLE **D** ☐ Delete
 NAME **FRANCO, JACK**
 STREET ADDRESS **2436 FLAMINGO DR. #12B**
 CITY-ST-ZIP **MIAMI BEACH FL 33140**

TITLE **S** ☐ Delete
 NAME **FRANCO, CARI**
 STREET ADDRESS **29C VENETIAN WAY # 18**
 CITY-ST-ZIP **MIAMI FL 33139**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D, P** ☒ Change ☒ Addition
 NAME **Jack Franco**
 STREET ADDRESS **90 Alton Rd, Apt # 1908**
 CITY-ST-ZIP **M. Beach FL 33139**

TITLE **S** ☒ Change ☐ Addition
 NAME **Cori Franco**
 STREET ADDRESS **10 Venetian Way Apt 2306**
 CITY-ST-ZIP **M. Beach, FL 33139**

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

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

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cori Franco
Secretary

3/7/02
 Date

Daytime Phone #

305.577.7043

CR2E034 (9/01)