

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90027 041 ***150.00

DOCUMENT # P98000014067

1. Entity Name

JORDAN SURVEY & SYSTEMS SPECIALIST, INC.

Principal Place of Business

Mailing Address

ENTRADA DR.
 WOOD FL 33021

311 ENTRADA DR.
 HOLLYWOOD FL 33024-4963

040219



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

8210 NW 15th St

8210 NW 15th St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 Pembroke Pines, FL

City & State
 Pembroke Pines, FL

4. FEI Number
 65-0814026

Applied For
 Not Applicable

Zip
 33024-4963

Country
 USA

Zip
 33024-4963

Country
 USA

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

Name

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

City
 Pembroke Pines FL 33024

JORDAN, BONNIE
 311 ENTRADA DR.
 HOLLYWOOD FL 33021

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 Bonnie Jordan, President
 Signature, typed or printed name of registered agent and title if applicable

3/8/2000
 DATE

(NOTE: Registered Agent signature required when reinstating)

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P JORDAN, BONNIE 311 ENTRADA DR. HOLLYWOOD FL 33021 | <input type="checkbox"/> Delete |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 8210 NW 15th St Pembroke Pines, FL 33024-4963 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 Bonnie Jordan, President
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/2000
 Date

CR2E034 (9/99)