

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

**FILED**  
**Apr 02, 2002 8:00 am**  
**Secretary of State**

04-02-2002 90858 019 \*\*\*150.00

**DOCUMENT #** P98000018527

1. Entity Name

JCH Holdings, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3. Mailing Address

~~700 Universe Boulevard~~

~~700 Universe Boulevard~~

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Attn: Dennis P. Coyle

Attn: Dennis P. Coyle

City & State

City & State

Juno Beach, FL

Juno Beach, FL

Zip

Zip

33408

Country

USA

Country

USA

4. FEI Number

Not Applicable

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

J. E. Leon

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

9250 West Flagler Street

City

Miami

FL

Zip Code

33174

**DO NOT WRITE  
IN THIS SPACE**

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) ☐

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Schultz, Alexander  
700 Universe Boulevard  
Juno Beach, FL 33408

TITLE  
NAME  
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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Alexander Schultz*

Alexander Schultz

03/11/02

(561) 694-3424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)