2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P98000019288 Feb 29, 2000 8:00 am Secretary of State 1. Entity Name JOCKO, INC. 02-29-2000 90194 022 ***150.00 Principal Place of Business Mailing Address 760 SE 2ND AVE. #G101 760 SE 2ND AVE. #G101 SUBSTITUTE BEACH FL 33441 DEERFIELD BEACH FL 33442-9631 2. Principal Place of Business 565 JEFFERSON DR DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0818228 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MANGER, JANIS J 760 SE 2ND AVE. #G101 **DEERFIELD BEACH FL 33441** 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 This corporation is eligible to satisfy its!Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. **PVDS** Change ☐ Addition Delete TITLE MANGER, JANIS J NAME 565 JEFFERSON DR. #114 760 SE 2 AVE, #G101 STREET ADDRESS DEERFIELD BOH 71.33442 CITY-ST-ZIP ST-ZIP **DEERFIELD BCH FL 33441** TITLE ☐ Delete MANGER, JANIS J NAME ADDDEÇÇ 760 SE 2 AVE, #G101 STREET ADDRESS CITY-ST-ZIP ST-ZIP DEERFIELD BCH FL 33441 -TITLE - Delete NAME MOREGO STREET ADDRESS CITY-ST-ZIP ST-ZIP Delete TITLE Change Addition NAME STREET ADDRESS ADDOCC! CITY-ST-ZIP ST-7IP ☐ Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS ADDDCCC CITY, ST. 7IP ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME *DDDE33 STREET ADDRESS CITY-ST-ZIP 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.