

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90011 027 ***150.00

DOCUMENT # P98000019288

1. Entity Name

JOCKO, INC.

Principal Place of Business

Mailing Address

~~305 JEFFERSON DR~~

~~505 JEFFERSON DR~~

~~SUITE 114~~

~~SUITE 114~~

DEERFIELD BEACH FL 33442

DEERFIELD BEACH FL 33442

549724



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

127 CENTENNIAL CT.

127 CENTENNIAL CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DEERFIELD BEACH, FL

DEERFIELD BEACH FL

Zip

Country

Zip

Country

33442

BRAND

33442

BRAND

4. FEI Number

65-0818228

Applied For

Not Applicable

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

MANGER, JANIS J

~~305 JEFFERSON DR~~

~~SUITE 114~~

DEERFIELD BEACH FL 33442

127 CENTENNIAL CT.

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

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVDS
MANGER, JANIS J
~~305 JEFFERSON DR. #114~~
DEERFIELD BCH FL 33442 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
127 CENTENNIAL CT.
DEERFIELD BCH FL 33442 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
MANGER, JANIS J
~~305 JEFFERSON DR. #114~~
DEERFIELD BCH FL 33442 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
127 CENTENNIAL CT.
DEERFIELD BCH FL 33442 ☒ Change ☐ Addition

TITLE
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☐ Delete

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

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: *Janis J. Manger* JANIS J. MANGER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-28-01

959-421-7592

CR2E034 (10/00)