## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR**

## **DOCUMENT #**

P98000035306

1. Entity Name

T J B SALES, INC.



## **FILED** Jan 06, 2003 8:00 am Secretary of State 01-06-2003 90008 032 \*\*\*150.00

Principal Plac 320 HAZELTIN DEBARY FL 3		320 HAZEI	Mailing Address 320 HAZELTINE DRIVE DEBARY FL 32713  3. Mailing Address								
2. Principal F	Place of Business	3. Mailing									
Suite, Apt.	#, etc.	Suite, Ap	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & Stat	de	City & St	City & State				FEI Number <b>59-3509343</b>		$\rightarrow$	pplied For	
Zip	Country	Zip	Zip Cou			5. (	Certificate of Status Desired	P 75 Addisonal			
<del></del>	6. Name and Address of C	Urrent Registered Ac	ient	<u> </u>		7. N	Name and Address of New Re			u	
<u>.</u>		•	<u> </u>		Name			3			
BROPHY,	TIMOTHY J		Chara Addu			(2.0.0					
	LTINE DRIVE		Street Ac			ress (P.O. B	lox Number is Not Acceptable)	<del></del>			
UEDART	rL 327 13				City			FL	Zip Cod	e	
	named entity submits this state tions of registered agent.	ment for the purpose of	of changing it	. j s registere	ed office or req	gistered age	ent, or both, in the State of Flori	·	liar with,	and accept	
SIGNATURE .	0		<u> </u>								
	Signature, typed or printed name of register	red agent and title if applicable	. (NO	TE: Registered	Agent signature re	equired when re	einstating)	DATE			
Afte	ILE NOW!!! FEE IS \$150.0 r May 1, 2003 Fee will be \$5 c Payable to Florida Departn	50.00					9. Election Campaign Fina Trust Fund Contribution.			<b>0</b> May Be I to Fees	
10.		S AND DIRECTORS		<b>B</b> 44			DITIONS (SULANIOSO TO OFFICE	SEDÓ AND DIE	FATABL	211144	
TITLE	D		☐ Delete	11.		AD	DITIONS/CHANGES TO OFFIC		Change	Addition	
NAME	BROPHY, TIMOTHY J		☐ Delete	· NAM				U	Gliange	Addition	
STREET ADDRESS	320 HAZELTINE DRIVE			STREE	T ADDRESS						
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.