

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000047684

1. Entity Name

THE JUPITER GROUP DEVELOPMENT & INVESTMENT
CORP.

Principal Place of Business

Mailing Address

8731 SW 14TH ST
PEMBROKE PINES
FL 33025

SAME

2. Principal Place of Business

8731 SW 14TH ST

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PEMBROKE PINES, FL

City & State

PEMBROKE PINES, FL

Zip

33025

Country

US

Zip

33025

Country

US

REINSTATEMENT

4. FEI Number

65-0840001

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

Name

BENSON SOMUAH

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

8731 SW 14TH ST

City

PEMBROKE PINES

FL

Zip Code

33025

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 Benson Somuah (BENSON SOMUAH) VICE PRESIDENT / DIRECTOR 3-14-00

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, 2000 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 ☐ Delete
NAME PRESIDENT / DIRECTOR
STREET ADDRESS HENRY THOMAS
CITY-ST-ZIP 9200 BAY HARBOR TER #5B
BAY HARBOR ISLANDS FL 33154

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000003241640--6
CITY-ST-ZIP -05/08/00--01003--007
****750.00 ****750.00

TITLE ☐ Delete
NAME VICE PRESIDENT / DIRECTOR
STREET ADDRESS BENSON SOMUAH
CITY-ST-ZIP 8731 SW 14TH ST
PEMBROKE PINES FL 33025

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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: Benson Somuah (BENSON SOMUAH) VP / DIR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-00

Date

954 483-7172

Daytime Phone #

CR2E034 (9/99)