

2000 UNIFORM BUSINESS REPORT (UBR)

4/2

DOCUMENT # P98000081239

1. Entity Name

J WALKER STEVENS, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

04-29-2000 90014 001 ***155.00

Principal Place of Business

437 N.E. 23RD AVENUE
T.H. #4
POMPANO BEACH FL 33062-4823
US

Mailing Address

P.O. BOX 402
POMPANO BEACH FL 33061-0402
US

M.N. Stevens

2. Principal Place of Business

3. Mailing Address

2201 Pecan Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#325

City & State

City & State
McAllen, TX

Zip

Country

Zip

78501

Country

USA

4. FEI Number

65-0863935

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

STEVENS, JAMES W
437 N.E. 23RD AVENUE, T.H. #4
POMPANO BEACH FL 33062-4823

7. Name and Address of New Registered Agent

Name

Jaime Moscoso

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

9727 Hammocks Blvd.

#104 D

City

Miami

FL

Zip Code

33196

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

J. Walker Stevens - President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/24/2000

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

TITLE **P** ☐ Delete
NAME **STEVENS, J. WALKER**
STREET ADDRESS **437 N.E. 23RD AVE., T.H. #4**
CITY-ST-ZIP **POMPANO BEACH FL 33062-4823**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SECRETARY** ☐ Change ☒ Addition
NAME **M.N. Stevens**
STREET ADDRESS **2201 Pecan Blvd., #325**
CITY-ST-ZIP **McAllen, Tx 78501**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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 reports 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 an other like empowered.

SIGNATURE:

J. Walker Stevens **J. Walker Steven** **4/24/00**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JAIME MOSCOSO 5/17/00

NEW REGISTERED AGENT: Jaime Moscoso