

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000088182

1. Entity Name

J & L ERECTORS, INC.

FILED
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90013 034 ***158.75

Principal Place of Business

2027 SOUTH RIDGEWOOD AVENUE
EDGEWATER FL 32141
US

Mailing Address

2027 SOUTH RIDGEWOOD AVENUE
EDGEWATER FL 32136-2806
US

2. Principal Place of Business

1943 N. DAYTONA AVE
Suite, Apt. #, etc.

3. Mailing Address

1942 N. DAYTONA AVE
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

FLAGLER BEACH, FL

City & State

FLAGLER BEACH FL

4. FEI Number - 59-3538535

Applied For
Not Applicable

Zip

Country

32136-2806 FLAGLER

Zip

Country

32136-2806 FLAGLER

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KLAES, JOHN
2027 SOUTH RIDGEWOOD AVENUE
EDGEWATER FL 32141

7. Name and Address of New Registered Agent

Name
KLAES, LINDA
Street Address (P.O. Box Number is Not Acceptable)
1943 N. DAYTONA AVE
City
FLAGLER BEACH FL Zip Code
32136-2806

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 *Linda Klaes* LINDA KLAES 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

TITLE P, S, T
NAME KLAES, LINDA
STREET ADDRESS 2027 S. RIDGEWOOD AVENUE
CITY-ST-ZIP EDGEWATER FL 32141 ☐ Delete

TITLE ST
NAME KLAES, JOHN
STREET ADDRESS 2027 S. RIDGEWOOD AVENUE
CITY-ST-ZIP EDGEWATER FL 32141 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P, S, T
NAME KLAES, LINDA
STREET ADDRESS 1943 N. DAYTONA AVE.
CITY-ST-ZIP FLAGLER BEACH, FL 32136-2806 ☒ Change ☐ Addition

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

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

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

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

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 *Linda Klaes* LINDA KLAES 3-14-00 904-439-0783

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)