

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000098317

1. Entity Name

SB JAX SECURITY, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90012 003 ***150.00

Principal Place of Business

Mailing Address

50 N LAURA STREET STE 2750
JACKSONVILLE FL 32202

50 N LAURA STREET STE 2750
JACKSONVILLE FL 32202-3640

2. Principal Place of Business

3. Mailing Address

UWSA SERVICES, INC

UWSA SERVICES, INC

Suite, Apt. #, etc.

Suite, Apt. #, etc.

701 PEACHTREE ROAD

701 PEACHTREE ROAD

City & State

City & State

ORLANDO

ORLANDO

Zip

Country

Zip

Country

32804

USA

32804

USA

4. FEI Number

59-3543333

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

MOTOLAW INC
50 N LAURA STREET STE 2750
JACKSONVILLE FL 32202

Name

UWSA SERVICES, INC

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

701 PEACHTREE ROAD

City

ORLANDO

FL

Zip Code

32804

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

21 APR 2000

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 PD
NAME CHARTOUNI, NABIL E
STREET ADDRESS 73 BROOK STREET
CITY-ST-ZIP LONDON W1Y1YE-ENGLAND ☐ Delete

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

TITLE D.
NAME SUTHERLAND, BARBARA
STREET ADDRESS 73 BROOK STREET
CITY-ST-ZIP LONDON W1Y1YE-ENGLAND ☐ Delete

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

TITLE VPT
NAME LAPWOOD, CAROL
STREET ADDRESS 73 BROOK STREET
CITY-ST-ZIP LONDON W1Y1YE-ENGLAND ☐ Delete

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

TITLE VPT
NAME VAGHADIA, VINOD
STREET ADDRESS 73 BROOK STREET
CITY-ST-ZIP LONDON W1Y1YE-ENGLAND ☐ Delete

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

V. VAGHADIA - VICE PRESIDENT

APRIL 13 2000 (407) 425 6880

CR2E034 (9/99)