## FILED 2000 UNIFORM BUSINESS REPORT (UBR) May 04, 2000 8:00 am Secretary of State J.F. Limited, INC. P98000102718 OCUMENT # 05-04-2000 90116 019 \*\*\*150.00 incipal Place of Business Ave, #E-4 3740 Almeria Ave# E-4 Mailing Address Savasita, FL 36239 java Sota, FL 34239 80082950 Principal Place of Business 3. Mailing Addres 3740 Almeria Avenue 3740 Almeria Avenue Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State Applied For 4. FEI Number 65-0886320 Not Applicable Savasota \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent John Allen Fellabaym Street Address (P.O. Box Number is Not Acceptable) 3740 Almeria avenue # E-4 Savasota, FL 34239 Zip Code City FL t. 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, typed or printed name of registered agent and title if applicable FILE NOWIN FEE IS \$150.00 This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filling requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 John Allen Fellabaum Delete ☐ Change ☐ Addition TLE TITLE NAME AME 3740 Almeria Ave # E-4 STREET ADDRESS TREET ADDRESS Sevasota, FL 34239 CITY-ST-7iP ITY-ST-ZIP Director J. Ferrel ITLE ☐ Change ■ Addition NAME 806 Dakota Street STREET ADDRESS TREET ADDRESS Temple, Texas 76504 CITY-ST-ZIP TITLE Change \_\_\_\_\_ ☐ Addition Delete TLF AME NAME TREET ADDRESS STREET ADDRESS ITY-ST-ZIP CITY-ST-7IP ☐ Change Addition Delete TITLE NAME AME TREET ADDRESS STREET ADDRESS CITY-ST-ZIP ITY-ST-ZIP Addition Change ☐ Delete TITLE NAME TREET ADDRESS STREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition AME NAME STREET ADDRESS TREET ADDRESS CITY-ST-ZIP 3. 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. John Allen Fellabaum 4/26/2000 (957-0410