

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000011803

1. Entity Name

JAF INVESTMENT #114, INC.

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90150 042 ***150.00

Principal Place of Business

Mailing Address

7248 W PALMETTO PARK RD
101
BOCA RATON FL 33433

7248 W PALMETTO PARK RD
101
BOCA RATON FL 33433

UUU48959



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite 101 south

Suite, Apt. #, etc.

Suite 101 south

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-6893034

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

JAFERI, ALI M
7248 W PALMETTO PARK RD
BOCA RATON FL 33486

Name Jafari, Ali M.

Address (P.O. Box Number is Not Accepted)
1284 W. Palmetto Park Road

Suite 101 south

City Boca Raton

FL

Zip Code 33433

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.

ALI JAFERI

(NOTE: Registered Agent signature required when reinstating)

4/25/01
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, 2001 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 D
NAME JAFERI, ALI M ☐ Delete
STREET ADDRESS 7248 W PALMETTO PARK RD
CITY-ST-ZIP BOCA RATON FL 33486

TITLE D
NAME Jafari, Ali M ☐ Change ☐ Addition
STREET ADDRESS 1284 W. Palmetto Park Road, Suite 101 south
CITY-ST-ZIP Boca Raton, FL 33433

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALI JAFERI

Date

Daytime Phone #

4/25/01 (561) 892-9450

CR2E034 (10/00)

0306034