

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000028563

1. Entity Name
JCJ of Orlando, Inc.
dba Joe's Auto Service Center

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1106 Solana Avenue

Suite, Apt. #, etc.

3. Mailing Address

1106 Solana Avenue

Suite, Apt. #, etc.

City & State

Winter Park, FL

City & State

Winter Park, FL

Zip

32789

Country

USA

Zip

32789

Country

USA

4. FEI Number

59-3567289

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Miller, South & Milhausen, P.A.

Street Address (P.O. Box Number is Not Acceptable)
2699 Lee Road, Suite 120

City

Winter Park

FL

Zip Code
32789

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.
Miller, South & Milhausen, P.A.

SIGNATURE

Miller, South & Milhausen, P.A.

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

Attorney

(NOTE: Registered Agent signature required when reappointing)

08/30/02

Date

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P.V.T.S.D
William L. Tudor Jr
2609 River Ridge Dr
Orlando, FL 32825

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

9/20/02
aw

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *William L. Tudor Jr* William L. Tudor Jr 8/30/02 (407) 963-6930

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #