2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000034762 1. Entity Name JOE'S HOME PLATE, INC.							FILED Feb 14, 2002 8:00 am Secretary of State 02-14-2002 90018 017 ***150.00				
Principal Place of Business 3. Mailing Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State			4. 1	FEI Number 65-0982385			plied For t Applicable	
Zip	Country		Zip Count		try	5. Certificate of Status Desired			8.75 Add	litional	
6. Name and Address of Current Registered Agent						7. 1	Name and Address of New Re				
ANDROSKY, JOSEPH 310 EAST OCEAN AVE					Name Street Addres	ess (P.O. Box Number is Not Acceptable)					
LANTANA FL 33462					City			FL	Zip Code		
8. The above	named entity	y submits this statement for t	he purpose of changing its	registere	ed office or regis	stered ag	ent, or both, in the State of Flo	rida.			
SIGNATURE.	Signature, typed	or printed name of registered agent and	title if applicable. (NOTE	: Registere	d Agent signature requ	uired when re	einstating)	DATE			
Tax filing r	_	ible to satisfy its Intangible and elects to do so.	FILE NOW! After May 1, 20 Make Check Payab	02 Fee	will be \$550.0		10. Election Campaign Fina Trust Fund Contribution			May Be to Fees	
11.		OFFICERS AND DI		12.			L DITIONS/CHANGES TO OFFI	CERS AND D	DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	310 EAST	(Y, JOSEPH OCEAN AVE FL 33462	☐ Delete						Change	☐ Addition	
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STREET ADDRESS CITY-ST-ZIP				CITY	EET ADDRESS -ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete		1			1	Change	☐ Addition	
13. I hereby of indicated of the corchanged	certify that the don this report poration or the or on an atta	e information supplied with the rt or supplemental report is trace ne rezeliver or trustee empowe actment with an address, with	nis filing does not qualify for tue and accurate and that re rered dexecute this report that other like empowered	r the exe ny signa as requi	mption stated in ture shall have t red by Chapter	Section he same 607, Flori	119.07(3)(i), Florida Statutes. I legal effect as if made under o ida Statutes; and that my name	further certif ath; that I an appears in	y that the in an officer Block 11 or	nformation or director Block 12 if	

F/EQUIRED

Date

Daytime Phone #