

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000034858

1. Entity Name

SMALL JOBS PLUS INC.

**FILED**  
**Apr 20, 2000 8:00 am**  
**Secretary of State**

04-20-2000 90103 046 \*\*\*150.00

Principal Place of Business

Mailing Address

4071 KATHRYN ST.  
SARASOTA FL 34233

4071 KATHRYN ST.  
SARASOTA FL 34233-1206

2. Principal Place of Business

4330 SAWYER RD

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

65-0914596

Applied For

Not Applicable

Zip

34233

Country

SARASOTA

Zip

34233

Country

SARASOTA

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

SMALLWOOD, THEADORE  
4071 KATHRYN ST.  
SARASOTA FL 34233

7. Name and Address of New Registered Agent

Name

SMALLWOOD, THEADORE

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

4330 SAWYER RD

City

SARASOTA

FL

Zip Code

34233

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

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS SMALLWOOD, THEADORE  
CITY-ST-ZIP 4071 KATHRYN ST.  
SARASOTA FL 34233

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME P/S  
STREET ADDRESS SMALLWOOD, THEADORE  
CITY-ST-ZIP 4330 SAWYER RD  
SARASOTA FL 34233

TITLE ☐ Change ☒ Addition  
NAME VIT  
STREET ADDRESS SMALLWOOD, ROBIN  
CITY-ST-ZIP 4330 SAWYER RD  
SARASOTA FL 34233

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

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

TITLE ☐ Change ☐ Addition  
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: *Smallwood, V.P.* SMALLWOOD, V.P.

4/14/00 (941)925-4298

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)