

# 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P99000042710

1. Entity Name

J & J AUTO EXPRESS INC.

R

FILED

00 OCT 25 AM 9:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

116 ALDER AVE.  
ALTAMONTE SPRINGS FL 32714

116 ALDER AVE.  
ALTAMONTE SPRINGS FL 32714

2. Principal Place of Business

116 Alder Av

3. Mailing Address

PO BOX 250

Suite, Apt. #, etc.

Altamonte Springs Fl

Suite, Apt. #, etc.

Altamonte Springs Fl

City & State

32714

City & State

32704

Zip

Country

Zip

Country

4. FEI Number

52-2173580

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

RODRIGUEZ, JORGE A  
116 ALDER AVE.  
ALTAMONTE SPRINGS FL 32714

Name

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

City

FL

Zip Code

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

*Jorge Rodriguez*

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

(NOTE: Registered Agent signature required when reinstating)

9-9-00

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$550.00**  
After SEPTEMBER 13, 2000 Min. will be \$750.00  
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: President  
NAME: Jorge Rodriguez  
STREET ADDRESS: 116 Alder Av  
CITY-ST-ZIP: Altamonte Fl. 32714  Delete

TITLE:  Delete

TITLE:  Delete

TITLE:  Delete

TITLE:  Delete

TITLE:  Delete

TITLE:  Change  Addition

TITLE:  Change  Addition

TITLE:  Change  Addition

TITLE:  Change  Addition

TITLE:  Change  Addition

TITLE:  Change  Addition  
SP

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:

*Jorge Rodriguez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(407) 701-3143

Daytime Phone #

CR2E034 (5/00)

NOTES

#PA900048710

10078358

To whom it concern

I'm sending my company's UBL late  
cause I never receive the first letter  
Please send letters to PO BOX. I need to see  
if you could waive penalty.

Thanks

MEETINGS

PROJECTS

TASK LIST