

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90309 038 ***150.00

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1. Entity Name

J & S SYSTEM TECHNOLOGIES, INC.

Principal Place of Business

**3293 CLOVERPLACE DRIVE
 PALM HARBOR, FL 34684**

Mailing Address

**3293 CLOVERPLACE DRIVE
 PALM HARBOR, FL 34684**

2. Principal Place of Business

1118 LANCER LANE

Suite, Apt. #, etc.

3. Mailing Address

1118 LANCER LANE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TARPON SPRINGS, FL

City & State

TARPON SPRINGS, FL

4. FEI Number

59 3577818

Applied For

Not Applicable

Zip

34689

Country

USA

Zip

34689

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

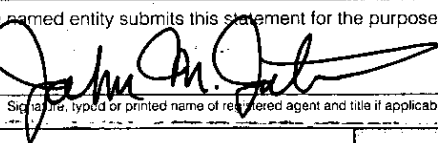
**SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES, FL 33134**

7. Name and Address of New Registered Agent

Name
JOHN M. JULIANO
 Street Address (P.O. Box Number is Not Acceptable)
1118 LANCER LANE
 City
TARPON SPRINGS FL Zip Code
34689

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

2/19/2001

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


TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PSTD	JOHN M. JULIANO	3293 CLOVERPLACE	34689 FL 34689
V	XANTHIPE JULIANO	3293 CLOVERPLACE	34689 FL 34689
PSTD	JOHN M. JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
V	XANTHIPE JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
PSTD	JOHN M. JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
V	XANTHIPE JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
PSTD	JOHN M. JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
V	XANTHIPE JULIANO	3293 CLOVERPLACE DR	34689 FL 34689

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PSTD	JOHN M. JULIANO	3293 CLOVERPLACE	34689 FL 34689
V	XANTHIPE JULIANO	3293 CLOVERPLACE	34689 FL 34689
PSTD	JOHN M. JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
V	XANTHIPE JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
PSTD	JOHN M. JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
V	XANTHIPE JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
PSTD	JOHN M. JULIANO	3293 CLOVERPLACE DR	34689 FL 34689
V	XANTHIPE JULIANO	3293 CLOVERPLACE DR	34689 FL 34689

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

Feb 19, 2001

Date

727-515-3363

Daytime Phone #

CR2E034 (11/00)