

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

DOCUMENT # *P99000066210*

1. Entity Name

JAGUAR Commercial, Inc.

FILED

02 OCT 25 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3949 RANDALL RD.

Suite, Apt. #, etc.

3. Mailing Address

3949 RANDALL RD *P.O. Box 1307*

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Green Cove Springs, FL

Zip

32043

Country

Clay

City & State

Green Cove Springs, FL

Zip

32043

Country

4. FEI Number

59-3588997

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Jimmy Perry

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

3949 RANDALL RD.

City

Green Cove Springs

FL

Zip Code

32043

**DO NOT WRITE
IN THIS SPACE**

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)



January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 *President*
NAME *Jimmy Perry*
STREET ADDRESS *3949 RANDALL RD*
CITY-ST-ZIP *Green Cove Springs, FL 32043*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
700008596977
*10/25/02--U1086--007 **150.00*

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-22-02

CR2E034B (12/01)

JAGUAR COMMERCIAL, INC.
3949 RANDALL ROAD
GREEN COVE SPRINGS, FL 32043

October 7, 2002

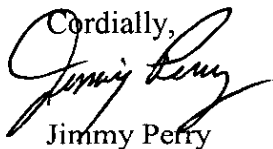
Uniform Business Report
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

We never received our Uniform Business Report (UBR). We are enclosing a form which we have filled out. Please accept our check for \$150.00 for the filing fee. We ask that you waived any additional charges because we did not receive our original form.

Thank you for your time and consideration.

Cordially,

A handwritten signature in cursive script, appearing to read "Jimmy Perry".

Jimmy Perry