

2000 UNIFORM BUSINESS REPORT (UBR)

7/1

FILED

Aug 03, 2000 8:00 am
Secretary of State

07-11-2000 90173 038 ***150.00

DOCUMENT # P99000073311

1. Entity Name
JPM & ASSOCIATES, INC.

Principal Place of Business

**1902 43RD STREET NORTH
TAMPA FL 33605**

Mailing Address

**1902 43RD STREET NORTH
TAMPA FL 33605**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

593593918

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MATALLANA, CARLOS
1902 43RD STREET NORTH
TAMPA FL 33605**

7. Name and Address of New Registered Agent

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

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 \$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

TITLE	D	☐ Delete
NAME	MATALLANA, CARLOS	
STREET ADDRESS	1902 43RD STREET NORTH	
CITY-ST-ZIP	TAMPA FL 33605	
TITLE	D	☐ Delete
NAME	MATALLANA, JOHN	
STREET ADDRESS	1902 43RD STREET NORTH	
CITY-ST-ZIP	TAMPA FL 33605	
TITLE	D	☐ Delete
NAME	PAPPAN, PATRICIA	
STREET ADDRESS	1902 43RD STREET NORTH	
CITY-ST-ZIP	TAMPA FL 33605	
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		
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

07-06-00 (813) 241 2653

CR2E034 (5/00)

JPM & ASSOCIATES



1902 43RD ST. NORTH ♦ TAMPA, FL 33619 ♦ USA
Phone (813) 241 2658 ♦ Fax (813) 247 6727 ♦ Email A1FAST@GTE.NET

0990000073311
07/139

July 27, 2000

FLORIDA DEPARTMENT OF STATE

TO WHOM IT MAY CONCERN:

This is to inform for the second time that I Never received my annual report before may 2000 and when I received it came with the late fee of \$400.00 then I called and spoke two times with different people explaining the situation and both times they advice me to write this letter so the fee will be removed I appreciate the attention on this matter.

Sincerely,



Carlos Matallana

President