

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2002 8:00 am
Secretary of State

05-09-2002 90091 049 ***158.75

DOCUMENT # P99000086456

1. Entity Name

ED JONES PAINTING COMPANY, INC.

Principal Place of Business

**1314 SOUTH 17TH AVE.
HOLLYWOOD FL 33020**

Mailing Address

**1314 SOUTH 17TH AVE.
HOLLYWOOD FL 33020**

2. Principal Place of Business

16141 92nd Lane North

3. Mailing Address

16141 92nd Lane North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Loxahatchee, Florida

City & State
Loxahatchee, Florida

4. FEI Number **65-0970526**

Applied For

Not Applicable

Zip **33470**

Country

USA

Zip **33470**

Country

USA

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**JONES, EDWARD
1314 SOUTH 17TH AVE.
HOLLYWOOD FL 33020**

7. Name and Address of New Registered Agent

Name **Edward Jones**

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

16141 92nd Lane North

City **Loxahatchee**

FL

Zip Code **33470**

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 **Edward Jones - President**

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/02

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, 2002 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 **P** ☒ Delete
NAME **JONES, EDWARD**
STREET ADDRESS **1314 S. 17TH AVE**
CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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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 **President** ☒ Change ☐ Addition
NAME **Jones, Edward**
STREET ADDRESS **16141 92nd Lane North**
CITY-ST-ZIP **Loxahatchee, FL. 33470**

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

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

TITLE ☐ Change ☐ Addition
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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:

Edward Jones

Edward Jones - President

4-24-02

561-632-4522

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0147122 AV

CR2E034 (9/01)