## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P99000090489

6. Name and Address of Current Registered Agent

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

380 SEMORAN COMMERCE PLACE, STE. A-103

OFFICERS AND DIRECTORS

1. Entity Name

T.J. SIMON, INC.

Principal Place of Business

Mailing Address

380 SEMORAN COMMERCE PLACE, STE, A-103 APOPKA FL 32703

JURGENS, J.A. P.A.

SIGNATURE

11.

TITLE NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

TITLE

NAME

STREET ADDRESS

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CITY-ST-ZIP

LONGWOOD FL 32779

505 WEKIVA SPRINGS RD., STE. 500

9. This corporation is eligible to satisfy its Intangible

TALBOT, TIMOTHY J

APOPKA FL 32703

Tax filing requirement and elects to do so.

(See criteria on back)

380 SEMORAN COMMERCE PLACE, STE. A-103

Hunt Club Blvd.

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

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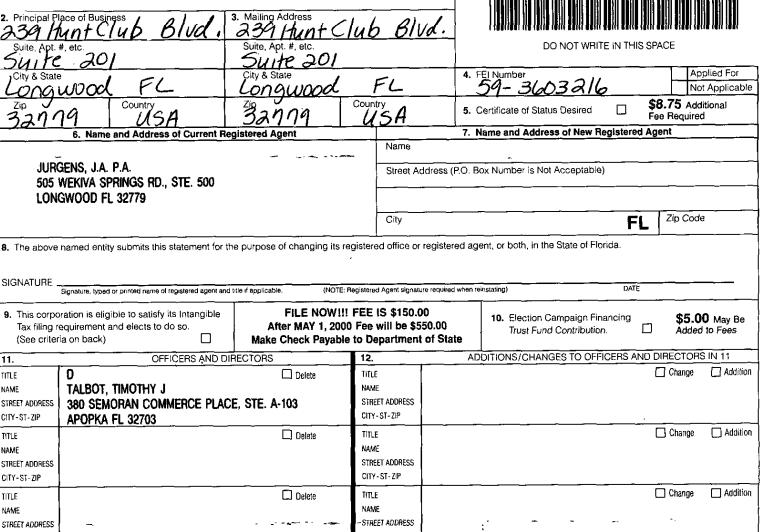
Name

APOPKA FL 32703-4683

3. Mailing Address

## FILED Apr 23, 2000 8:00 am Secretary of State

04-23-2000 90052 049 \*\*\*150.00



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

SIGNATURE:

SIGNATURE ARE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

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Addition

Addition

☐ Addition

CR2E034 (9/99