

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90109 045 ***158.75

DOCUMENT # P99000090512

1. Entity Name

J.J. REAL ESTATE INVESTMENT GROUP, INC.

Principal Place of Business

**1818 S. AUSTRALIAN AVENUE
SUITE 400
WEST PALM BEACH FL 33409**

Mailing Address

**1818 S. AUSTRALIAN AVENUE
SUITE 400
WEST PALM BEACH FL 33409**

2. Principal Place of Business

440 Columbia Drive

Suite, Apt. #, etc.

Suite 300

City & State

West Palm Beach FL

Zip

33409

Country

3. Mailing Address

440 Columbia Drive

Suite, Apt. #, etc.

Suite 300

City & State

West Palm Beach FL

Zip

33409

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0954002**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ROY, DAVE K
1818 S. AUSTRALIAN AVENUE
SUITE 400
WEST PALM BEACH FL 33409**

7. Name and Address of New Registered Agent

Name

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

440 Columbia Drive

Suite 300

City

West Palm Beach

FL

Zip Code
33409

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]
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 \$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 **D** ☐ Delete
NAME **ROY, DAVE K**
STREET ADDRESS **1818 S. AUSTRALIAN AVENUE**
CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PVST** ☒ Change ☒ Addition
NAME
STREET ADDRESS *440 Columbia Drive, Suite 300*
CITY-ST-ZIP *West Palm Beach, FL 33409*

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

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

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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 all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-616-0064

CR2E034 (10/00)