

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90123 030 ***158.75

DOCUMENT # P99000104479

1. Entity Name

JUNO BAIT & CUSTOM RODS, INC.

Principal Place of Business
 1977 PLEASANT DRIVE
 NORTH PALM BEACH FL 33408

Mailing Address
 1977 PLEASANT DRIVE
 NORTH PALM BEACH FL 33408

2. Principal Place of Business

12220 US Hwy 1
 Suite, Apt. #, etc.

3. Mailing Address

12220 US Hwy 1
 Suite, Apt. #, etc.

City & State

North Palm Beach FL.

City & State

N. Palm Beach FL.

4. FEI Number

65-0656825

Applied For

Not Applicable

Zip

33408

Country

FLA

Zip

33408

Country

FLA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHEELER, JAMES A
1977 PLEASANT DR
NORTH PALM BEACH FL 33408

Name: **JAMES A. Wheeler**

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

12220 US Hwy 1

N. Palm Beach

City

FL.

FL

Zip Code

33408

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

James A. Wheeler President

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

(NOTE: Registered Agent signature required when reinstating)

2-31-02

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P
WHEELER, JAMES
1977 PLEASANT DRIVE
NORTH PALM BEACH FL 33408

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 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:

James A. Wheeler / **JAMES A. Wheeler / President**

Date

2-31-02

Daytime Phone #

561-684-2797

CR2E034 (9/01)

Attachment # P99000104479

831271

To Whom it May Concern:

The Actual Place of Business Address is

12220 US Hwy 1

N. Palm Beach Fl. 33408, Please call if
anything is needed

Thanks J. Wheeler