

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State

02-19-2002 90019 033 ***150.00

DOCUMENT # P99000107196

1. Entity Name
J&J AEROSPACE PARTS, INC.

Principal Place of Business

30370 OLD DIXIE HWY
#325
MIAMI FL 33033
US

Mailing Address

18790 S.W. 248 STREET
HOMESTEAD FL 33031



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1621 NE 6TH AVE

Suite, Apt. #, etc.

SUITE B

City & State
OCALA FL

Zip
34470

Country
MALION

3. Mailing Address

1621 NE 6TH AVE

Suite, Apt. #, etc.

SUITE B

City & State
OCALA FL

Zip
34470

Country
MALION

4. FEI Number

65-0981902

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOWDEN, GEORGE J
18790 S W 248 ST
HOMESTEAD FL 33031

7. Name and Address of New Registered Agent

Name
BOWDEN GEORGE J
 Street Address (P.O. Box Number is Not Acceptable)
1621 NE 6TH AVE
SUITE B
 City
OCALA FL Zip Code
34470

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

1/31/2002

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	V	<input type="checkbox"/> Delete
NAME	BOWDEN, WILLIAM V	
STREET ADDRESS	18790 SW 248TH ST	
CITY-ST-ZIP	MIAMI FL 33031	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BOWDEN, CHRISTOPHER	
STREET ADDRESS	18790 SW 248TH ST	
CITY-ST-ZIP	MIAMI FL 33031	
TITLE	EVPS	<input type="checkbox"/> Delete
NAME	BOWDEN, JENNIFER S	
STREET ADDRESS	18790 SW 248TH ST	
CITY-ST-ZIP	MIAMI FL 33031	
TITLE	P	<input type="checkbox"/> Delete
NAME	BOWDEN, GEORGE J	
STREET ADDRESS	18790 S W 248 ST	
CITY-ST-ZIP	HOMESTEAD FL 33031	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/2002

Date

352-732-5400

Daytime Phone #

CR2E034 (9/01)