

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S87932

1. Entity Name  
J W SALES, INC.

Principal Place of Business  
421 LIGHTHOUSE DR.  
PALM BCH. GARDENS FL 33410  
US

Mailing Address  
421 LIGHTHOUSE DR.  
PALM BCH. GARDENS FL 33410  
US

2. Principal Place of Business  
15886 85th Rd  
Suite, Apt. #, etc.  
LOXAHATCHEE

3. Mailing Address  
15886 85th Rd  
Suite, Apt. #, etc.  
LOXAHATCHEE FI

City & State  
LOXAHATCHEE FL  
Zip  
33470  
Country  
USA

City & State  
LOXAHATCHEE FI  
Zip  
33470  
Country  
USA

4. FEI Number 65-0298918  
Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

JOYCE A. WATSON  
421 LIGHTHOUSE DR.  
PALM BCH. GARDENS FL 33410

## 7. Name and Address of New Registered Agent

Name  
JOYCE A. WATSON  
Street Address (P.O. Box Number is Not Acceptable)  
15886 85th Rd  
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 *Joyce A. Watson* JOYCE A. WATSON 1-5-2001  
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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
WATSON, JOYCE A.  
421 LIGHTHOUSE DR.  
PALM BCH. GARDENS FL 33410 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
WATSON, JOYCE A.  
15886 85th Rd  
LOXAHATCHEE FI 33470 ☒ Change ☐ Addition

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

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

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

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

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

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: *Joyce A. Watson* JOYCE A. WATSON 1-5-2001 361-792-4344  
Signature, typed or printed name of signing officer or director Date Daytime Phone #

FILED  
Jan 19, 2001 8:00 am  
Secretary of State

01-19-2001 90050 025 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)