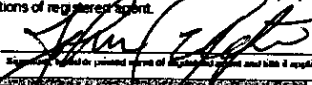


FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90235 034 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

00033400

DOCUMENT #V23131			
1. Entity Name C & J MOBIL, INC.			
Principal Place of Business 12751 EAST TAMiami TRAIL NAPLES, FL 34113 US		Mailing Address 12751 EAST TAMiami TRAIL NAPLES, FL 34113 US	
2. Principal Place of Business 1101 Rosemary Court Suite, Apt. #, etc. A201		3. Mailing Address 1101 Rosemary Court Suite, Apt. #, etc. A201	
City & State Naples, Florida		City & State Naples, Florida	
Zip 34103		Country USA	
4. FEI Number 65-0328365		Applied For Not Applicable	
5. Certificate of Status Desired ☐		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RETZNER, JOHN E. 12751 EAST TAMiami TRAIL NAPLES, FL 34113		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1101 Rosemary Court, A201 City, State, Zip Naples, FL 34103	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE  JOHN E. RETZNER FEB 21-03		DATE FEB 21-03	
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP PD RETZNER, JOHN E. 12751 EAST TAMiami TRAIL NAPLES, FL 34113 ☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP 1101 Rosemary Court, #A201 Naples, Florida 34103 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP VD PLAMONDON, MARK B. II 12751 E TAMiami TRAIL NAPLES, FL 34113 ☒ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP S RETZNER, RYAN J 12751 E TAMiami TRAIL NAPLES, FL 34113 ☒ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, not otherwise empowered.			
SIGNATURE  JOHN E. RETZNER 2/21/03 6496400		DATE FEB 21-03	

CRBEC34 (10/02)