

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 05, 2001 8:00 am**
Secretary of State

05-05-2001 91104 012 ***150.00

DOCUMENT # V63244

1. Entity Name

JACKSON BUSINESS ENTERPRISES, INC.

Principal Place of Business

Mailing Address

~~2700 W ATLANTIC BLVD~~ 621 S Georgia
~~#200-25~~
~~POMERANO BCH FL 33069~~ COCOA, FL 32922
US621 S GEORGIA AVE
COCOA FL 32922

040100



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

621 S. Georgia Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Cocoa, FL 32922

4. FEI Number 65-0355051

Applied For

Not Applicable

Zip

Country

Zip

Country

32922

USA

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

JACKSON, ROOSEVELT L., SR.

621 S GEORGIA AVE

COCOA FL 32922

Name

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

City

FL

Zip Code

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: *Roosevelt L. Jackson, SR*
Signature, typed or printed name of registered agent and title if applicable.Roosevelt L. Jackson, SR
(NOTE: Registered Agent signature required when reinstating)

4-25-2001

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CPD ☐ Delete
NAME JACKSON, R.L., SR.
STREET ADDRESS 621 S GEORGIA AVE
CITY-ST-ZIP COCOA FL 32922TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE D ☐ Delete
NAME JACKSON, RUTH
STREET ADDRESS 621 S GEORGIA AVE
CITY-ST-ZIP COCOA FL 32922TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
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CITY-ST-ZIPTITLE ☐ 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 an address, with all other like empowered.

SIGNATURE: *Roosevelt L. Jackson, SR*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-2001 (321) 626 7713

Date

Daytime Phone #

CR2E034 (10/00)