**FILED** 

666.7

## 2002 Uniform Business Report (UBR)

SIGNATURE:

## Apr 03, 2002 8:00 am Secretary of State DOCUMENT # F81767 1. Entity Name 04-03-2002 90005 021 \*\*\*158.75 J & J POTTERY, PLANT & WICKER SHOP, INC. Principal Place of Business Mailing Address C/O IRAIDA BORGES-VENEGAS C/O IRAIDA BORGES-VENEGAS 4652 S.W. 72 AVENUE 470 2 SW 72ND AVENUE MIAMI FL 33155-4516 MIAMI FL 33155-4516 US, 2. Principal Place of Business 3. Mailing Address 4702 SW 72 AUC. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2379161 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BORGES-VENEGAS, IRAIDA Street Address (P.O. Box Number is Not Acceptable) 16020 SW 42 TERRACE **MIAMI FL 33185** City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE Delete TITLE ☐ Change CR2E034 (9/01 PTSD NAME NAME BORGES-VENEGAS, IRAIDA STREET ADDRESS STREET ADDRESS 16020 SW 42 TERR CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33185 ☐ Delete ☐ Change Addition TITLE **VD** NAME NAME PAEZ, JANET STREET ADDRESS STREET ADDRESS 15790 SW 42 TERR CITY-ST-ZIP. -CITY-ST-ZIP - \_ MIAMI-FL 33185 Delete TITLE □ Change Addition TITLE NAME NAME PENA, JACQUELINE STREET ADDRESS STREET ADDRESS 3821 SW 140 COURT CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33175-0000 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if