

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 344329

1. Entity Name
J. J. GARCIA & ASSOCIATES, INC.

Principal Place of Business
1801 S.W. 135TH AVE.
MIAMI FL 33175

Mailing Address
1801 S.W. 135TH AVE.
MIAMI FL 33175

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1258046

Applied For
Not Applicable

Zip

Country

Zip

Country

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

GARCIA, JORGE J
1801 S.W. 135TH AVE.
MIAMI FL 33175

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VD
NAME GARCIA, JORGE J
STREET ADDRESS 1801 S.W. 135TH AVE.
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE VD
NAME LILLIAN L. GARCIA
STREET ADDRESS 1801 SW 135 AVE.
CITY-ST-ZIP MIAMI FL 33175 ☐ Change ☒ Addition

TITLE VSD
NAME GARCIA, DANIEL W
STREET ADDRESS 4314 SW 12 ST.
CITY-ST-ZIP MIAMI FL 33139 ☐ Delete

TITLE PD
NAME GARCIA, JORGE J.
STREET ADDRESS 1801 SW 135 AVE.
CITY-ST-ZIP MIAMI FL 33175 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE J. GARCIA

Date

Daytime Phone #

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90327 044 ***150.00

750624



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)