

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90365 039 ***150.00

DOCUMENT # 495133

1. Entity Name

JOMAR SALES CO.



Principal Place of Business

2250 S DIXIE HWY

3B

MIAMI FL 33133

Mailing Address

2250 S DIXIE HWY

3B

MIAMI FL 33133

2. Principal Place of Business

1541 BRICKELL AVENUE

3. Mailing Address

1541 BRICKELL AVENUE

Suite, Apt. #, etc.

B-3603

Suite, Apt. #, etc.

B-3603

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33129

Country

DADE

Zip

33129

Country

DADE



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

38-1860221

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSS, SHERWIN

2250 S DIXIE HWY S-3B

MIAMI FL 33133

7. Name and Address of New Registered Agent

Name

SHERWIN ROSS

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

1541 BRICKELL AVENUE, B-3603

City

MIAMI

FL

Zip Code

33129

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

Sherwin Ross

4/29/03

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
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ROSS, SHERWIN
STREET ADDRESS 2250 S. DIXIE HWY 5-3B
CITY-ST-ZIP MIAMI FL 33133 ☐ Delete

TITLE SD
NAME FISHER/ROSS, SANDRA
STREET ADDRESS 2250 S DIXIE HWY 5-3B
CITY-ST-ZIP MIAMI FL 33133 ☐ 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 1541 BRICKELL AVENUE, B-3603
CITY-ST-ZIP MIAMI, FL 33129 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS SEE ABOVE
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

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, with all other like empowered.

SIGNATURE:

Sherwin Ross SHERWIN ROSS

4/29/03

305 856 5399

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)