	ŀ	TLL	ĽD		
Jan	16.	200	2 8	3:00	am
	,			Sta	
,		J		,	

DOCUMENT # 576205 1. Entity Name J F M ENGINEERING INC.					Secretary of State 01-16-2002 90061 002 ***150.00					
Principal Place of Business 7880 NW 56 ST, MIAMI FL 33166		Mailing Address 6655 SW 93 AVE MIAMI FL 33173-2346 US								
2. Principal P	lace of Business	3. Mailing Address			l 1001.6 1 B3114		B\$0\$1 010 11 0 1011 01			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State			4. FEI Number 59-1860419 Applied For Not Applicable					
Zìp . '	Country Zip		Country	!	5. Certificate of Status Desired See Requir			litional		
	6. Name and Address of Current R	egistered Agent		7	7. Name and Ad	dress of New Registered				
MACH	1000EU F		Name							
MIBELLI, C			Street	Address (P.C	D. Box Number is	Not Acceptable)				
MIAMI FL	. 93RD AVENUE									
MIMMI FE	33173		City			FI	Zip Code			
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office	or registered	agent, or both, in	n the State of Florida.				
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE: F	Registered Agent sign	ature required wh	en reinstating)	DATE				
Tax filing r	pration is eligible to satisfy its Intangible requirement and elects to do so.	°FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
	ria on back)	Make Check Payable								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MIBELLI, JOSPEH F 6655 S.W. 93RD AVE. MIAMI FL	Delete	12. TITLE NAME STREET ADDRESS CITY-ST-ZIP		ADDITIONS/CH	ANGES TO OFFICERS AN	☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MIBELLI, PATRICIA L 6855 S.W. 93RD AVE. MIAMI FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOPEZ, PATRICIA 11820 SW-30TH-STREET MIAMI FL-33183	□ Delete .	TITLE "NAME" STREET ADDRESS CITY-ST-ZIP	746	2 S. W.	ATRICIA M. 143 Ave.	™ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Delete TIT NOVOA, P. ISABEL			VP M.C. 616	MCBRAYER, PATRICIA I. 160 S. W. 124 St.					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOPEZ, EDMUNDO J -1182 0 SW 80TH ST SUITE 315 -MIAMI FL 33183-	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LOP:		JNDO J. 143 Ave.	▼ Change	☐ Addition		
TITLE NAME STREET ADDRESS : CITY-ST-ZIP	ertify that the information supplied with the	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		mi, Fl.		Change	Addition		

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 or mike empowered.

SIGNATURE:

2002 UNIFORM BUSINESS REPORT (UBR)

9 Jan 2002 305-592-2272