F62783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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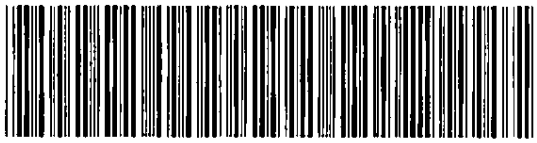

200392108342

NAME OF PERSON SUBMITTING DOCUMENT HILARIO LOPEZ

ADDRESS 1990 NW 183 STREET, MIAMI #10

CITY MIAMI STATE FL ZIPCODE 33055

AREA CODE AND PHONE NUMBER 305 625 7783

NAME OF CORPORATION H Z J INC

F62783

FOR OFFICE USE ONLY

✓ DOMESTIC	AMENDMENT	ALIEN ANNUAL REPORT
FOREIGN	DISSOLUTION	MERGER
PROFIT	REINSTATEMENT	MARK
NON-PROFIT	ANNUAL REPORT	RESERVATION
LIMITED PARTNERSHIP	CERTIFICATE UNDER SEAL	NC CERTIFIED COPY
		OTHER:

FILED
DEC 10 1 03 PM '81
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

30
15
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$48

REFUND

1-12

mw 1/13/82

KS

F62783

FILED

Dec 18 1 04 PM '81

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
H Z J, INC.

ARTICLE I: NAME

The name of this corporation shall be:

H Z J, INC.

ARTICLE II: PURPOSES

The purpose for which this corporation is formed are:

a. To engage in the business of brokerage, advertising, advertising consulting and all other things incident to the general business of brokerage, advertising and consulting.

b. To manufacture, purchase, construct, assemble, or in any manner dispose of, any and all types of appliances, engines, devices, vehicles, pertinences, and equipment incident thereto, and to engage in the retail and wholesale sales of any and all kinds of products and accesories.

c. To export from and import into the United States of America and its territories and possessions, and any and all foreign countries, as principal or agent, merchandise and/or aviation equipment of every kind and nature, and to purchase, sell, and deal in and with, at wholesale and retail, merchandise and/or equipment of every kind and nature for exportation from, and importation into the United States, and to and from all countries foreign thereto, and for exportation from, and importation into, any foreign country, to and from any other country foreign thereto, and to purchase and sell domestic and foreign merchandise and/or equipment in foreign markets, and to do a general foreign and domestic exporting and importing business.

d. To conduct business at one or more offices, and to own, mortgage, pledge, sell, convey, lease or otherwise dispose of real and personal property, and to invest in, trade, deal in and with goods, wares, and merchandise and services of every class, kind and description.

e. To rent, buy or control, develop, improve, construct, pledge, mortgage, lease, sell or otherwise acquire and dispose of real estate and personal property, or any interest therein, to erect buildings, to lay out, plot and subdivide lands into blocks of lots and to engage in all activities, to render all services, and to buy, sell, use, handle, and deal in all fixtures, machinery, apparatus, equipment, accesories, tools, materials, products, and merchandise incidental or related thereto, or of use therein.

f. To contract debts and bond money, issue and sell or pledge bonds, debentures, notes and other evidence of indebtedness, and execute such mortgages, transfers of corporate property, or other instruments to secure the payment of corporate idebtedness as required.

g. To purchase the corporate assets of any other corporation and engage in the same or other characteristics of business.

h. To guarantee, endorse, purchase, hold, sell, transfer, mortgage, pledge or otherwise acquire or dispose of the shares of the capital stock of, or any bonds, securities, or other evidences of indebtedness created by any other corporation of the State of Florida or any other state or government, and allow owner of such stock to exercise all the rights, powers and privileges of ownership, including the right to vote such stock.

i. To engage in every and all lawful activity under the laws of the State of Florida, including commercial fishing of all kinds.

ARTICLE III: PRINCIPAL OFFICE

The principal place of business of said corporation shall be: Suite No. 10, 1990 N.W. 183rd Street, Miami, Florida, with the privilege of having branch offices at any other place within and withouth the State of Florida.

ARTICLE IV: DIRECTORS

a. The number of directors of this corporation shall be no less than one (1) nor more than five (5).

b. The name and address of the person who is appointed as first director is:

NAME	ADDRESS
Hilario Lopez	Suite No.10, 1990 N.W. 183rd Street, Miami, Florida 33055
Zulma E. Perez	Suite No.10, 1990 N.W. 183rd Street, Miami, Florida 33055
John M. Perez	Suite No. 10, 1990 N.W. 183rd Street, Miami, Florida 33055

ARTICLE V: OFFICERS

The names and post offices addresses of the first officers of the corporation are:

President	Hilario Lopez Suite No.10, 1990 N.W. 183rd Street, Miami, Florida 33055
Vice President	John M. Perez Suite No. 10, 1990 N.W. 183rd Street, Miami, Florida 33055
Secretary	Zulma E. Perez Suite No.10, 1990 N.W. 183rd Street, Miami, Florida 33055

ARTICLE VI: RESIDENT AGENT

In pursuance of Chapter 49.091, Florida Statutes, the following is submitted in compliance with said Act.

First - That H Z J, INC. desiring to organize under the laws of the State of Florida with its principal office as indicated in the Articles of Incorporation at City of Miami, State of Florida, has named Hilario Lopez its agent to accept service of process within this State at Suite No.10, 1990 N.W.18Grd Street, Miami, Florida 33055.

Having named to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

Hilario Lopez, Resident Agent

ARTICLE VII: CAPITALIZATION

The amount of capital with which the corporation will begin business is Six Hundred and No/100 ($600.00) Dollars.

The maximum number of shares of stock that the corporation is authorized to have outstanding at any one time is six hundred (600) shares of stock at One Dollar ($1) per value each, all of which shall be common stock.

ARTICLE VIII: TERM OF EXISTENCE

The corporation shall have a perpetual existence.

ARTICLE IX: SUBSCRIBERS

The names and Street Addresses of the subscribers of these Articles of Incorporation and the number of shares each agree to take are:

NAME	NO. OF SHARES
Hilario Lopez	200
John M. Perez	200
Zulma E. Perez	200

ARTICLE X:

The Stockholders of this corporation may enter into such Stockholders Agreements as they may see fit wherein and whereby said Stockholders may limit their voting rights by virtue of such Stockholders Agreements.

IN WITNESS WHEREOF, I, the undersigned subscribing incorporator have hereunto set my hand and seal this 8th day of December 1981, for the purpose of forming this corporation under the laws of the State of Florida, and I hereby make and file in this office of the Secretary of State of the State of Florida these Articles of Incorporation and certify that the facts herein stated are true.

Hilario Lopez

STATE OF FLORIDA)

: SS.

COUNTY OF DADE)

BEFORE ME, the undersigned authority, duly authorized by law to take oaths and accept acknowledgments, personally, appeared Hilario Lopez, who, after first being duly sworn, depose and say that he is in fact the party who executed the above Articles of Incorporation.

SWORN TO AND SUBSCRIBED before me, this 8th day of December, 1981.

Notary Public
State of Florida at Large

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES DEC 15 1983
BONDED THRU GENERAL INS. UNDERWRITERS

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION ANNUAL REPORT **1982**

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
Nov 15 4 20 PM '82

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

F62783
H Z J, INC.
% HILARIO LOPEZ
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

If above address is incorrect in any way, enter the correct address in Item 2 Include Zip Code

2 Enter Change of Address of Corporation Principal Office. P O Box Number Alone is NOT Sufficient

Street Address

P O Box No

City

State Zip Code

3 Date Incorporated or Qualified To Do Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
12/10/1981		

6 Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LOPEZ, HILARIO	P/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
PEREZ, ZULMA E	S/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
PEREZ, JOHN M	V/D	STE 10, 1990 NW 183RD ST	MIAMI, FL

005 1792 11/19/82 10.00
005 1792 11/19/82 30.00 TL

Registered Agent Information

7 Name and Address of Current Registered Agent

LOPEZ, HILARIO
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

8 Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P O Box Number)

City, State and Zip Code

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10 *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F S
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath

Signature Hilario Lopez Date 10/18/82

Typed Name of Signing Officer HILARIO LOPEZ Title PRESIDENT Telephone Number

(R 11/80 10/82)

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
Nov 2 10 52 AM '83
SECRETARY OF STATE
MIAMI, FLORIDA

1983

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

F62783
H Z J, INC.
% MILARIO LOPEZ
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient
Street Address
P.O. Box No.
City
State Zip Code

3. Date Incorporated or Qualified to Do Business in Florida: 12/10/1981

4. Federal Employer Identification Number (FEIN)

5. Date of Last Report: 11/15/1982

Names and Street Addresses of Each Officer and Director, as of December 31, 1982

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LOPEZ, MILARIO	P/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
PEREZ, ZULMA E	S/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
PEREZ, JOHN M	V/D	STE 10, 1990 NW 183RD ST	MIAMI, FL

006 2881 11/08/83
006 2881 11/08/83

Registered Agent Information

7. Name and Address of Current Registered Agent

LOPEZ, MILARIO
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

8. Name and Address of New Registered Agent
Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The address and the registered agent's business office are identical and such change was authorized by resolution duly adopted by its board of directors or by an officer thereof duly authorized by the directors to make such change.

(Registered Agent Accepting Appointment) DATE 11/3/83

$2.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

Each Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. Does Hereby Certify That the Information Made to Indicate My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

11/3/83

Milario Lopez
MILARIO LOPEZ

Title DIRECTOR/P

Date 10/10/83

Telephone Number

(OR-55-6-82)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT 1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

FILED
JUL 2 1 34 PM '84

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1 Name and Address of Corporation Principal Office

F62783
H Z J, INC.
% HILARIO LOPEZ
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2 Enter Change of Address of Corporation Principal Office P.O. Box Number Alone is NOT Sufficient

Street Address:
P.O. Box No.:
City:
State: Zip Code:

3 Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5 Date of Last Report
12/10/1981		11/02/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	LOPEZ, HILARIO	P/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
2	PEREZ, ZULMA E	S/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
3	PEREZ, JOHN M	V/D	STE 10, 1990 NW 183RD ST	MIAMI, FL

005 6677 7/06/84

Registered Agent Information

7. Name and Address of Current Registered Agent

LOPEZ, HILARIO
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

8 Name and Address of New Registered Agent

Name:
Street Address (Do NOT Use P.O. Box Number):
City, State and Zip Code:

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on .....

SIGNATURE _____ DATE .....
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes. JH 7/5

10 *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Signature: John M Perez — Date: 6 - 20 - 84

Typed Name of Signing Officer: JOHN M. PEREZ — Title: VICE PRESIDENT — Telephone Number:

11 Should you desire a certificate of status check the box below and include an additional $5.00 with your payment.

CERTIFICATE OF STATUS DESIRED
$5 Additional fee required for certificates

COR 6201 (1 84)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT 1985

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

FILED
JUN 2? 3 24 PM '85
SECRETARY OF STATE
MIAMI, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

F62783 8
H Z J, INC.
% HILARIO LOPEZ
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code.

2. Enter Correct Address of Corporation Principal Office. P.O. Box Alone is NOT Sufficient
Street Address ... 0031 7/03/85
P.O. Box No.
City
State
Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 12/10/1981
4. Federal Employer Identification Number (FEIN)
5. Date of Last Report 07/02/1984

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	LOPEZ, HILARIO	P/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
2	PEREZ, ZULMA E	S/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
3	PEREZ, JOHN M	V/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
4				
5				
6				

Registered Agent Information

7. Name and Address of Current Registered Agent

LOPEZ, HILARIO
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

8. Name and Address of New Registered Agent
Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Such change was authorized by resolution duly adopted by its board of directors on ________
I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE ________ DATE ________
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter ... I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer signing must be listed in Block 6)

Signature: Zulma E. Perez
Date: 6/15/85

Typed Name of Signing Officer: ZULMA E. PEREZ
Title: CORPORATE SECRETARY
Telephone Number

6/25/85
6/28/85

$5 additional fee required for a Certificate of Status

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION

ANNUAL REPORT
1986

FILED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required – Make Checks Payable To: *Secretary of State*

1 Name and Address of Corporation Principal Office

F52783 B
J. J. INC.
% HILARIO LOPEZ
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

If above address is incorrect in any way, enter the correct address
Item 2 Include Zip Code

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Incorporated or Qualified to Do Business in Florida 12/10/1981

4 Federal Employer Identification Number (FEIN)

5 Date of Last Report 06/25/1985

Names and Street Addresses of Each Officer and Director, as of December 31, 1985

Names of Officers and Directors	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
JOSE A. SANCHEZ	P/D	STE 10, 1990 NW 183RD ST	MIAMI, FL 33056
ISRAEL RODRIGUEZ	S/D	STE 10, 1990 NW 183RD ST	MIAMI, FL 33056
	V/D	STE 10, 1990 NW 183RD ST	MIAMI, FL

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

8 Name and Address of New Registered Agent

Name 81
Jose A. Sanchez
Street Address (Do NOT Use P.O. Box Number) 82
Suite 10, 1990 N.W. 183rd Street
City and State 83
Miami FL.
Zip Code 84
33056

Pursuant to the provisions of Section 607.034 and/or 620.1905, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
The change was authorized by resolution duly adopted by its board of directors on March 7, 1986

The undersigned, by signing this appointment of registered agent, is familiar with and accepts the obligations of Section 607.325 F.S.

SIGNATURE Jose A. Sanchez DATE 7/28/86
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature requirements and instructions on reverse side of this form.

Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. Officer's name must be listed in Block 61.

Name and Signature of Officer Jose A. Sanchez Date 7/28/86

Name of Signing Officer: Jose A. Sanchez
Title: President
Telephone Number: (305) 624-6846

$3 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

DO NOT WRITE IN THIS SPACE

CORPORATION

ANNUAL REPORT

1987

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required – Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

F62783
Z J. INC.
C HILARIO LOPEZ
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33055

If above address is incorrect in any way enter the correct address in item 2 include Zip Code

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O Box No 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified to Do Business in Florida: 12/10/1981

4 Federal Employer Identification Number (FEIN)

5 Date of Last Report: 08/06/1986

Names and Street Addresses of Each Officer and Director as of December 31, 1986

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
RODRIGUEZ, ISRAEL	S/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
SANCHEZ, JOSE	P/D	STE 10, 1990 NW 183RD ST	MIAMI, FL
~~PEREZ~~	~~[illegible]~~	~~STE 10, 1990 NW 183RD ST~~	~~MIAMI, FL~~ (Please omit)

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

SANCHEZ, JOSE
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33056

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE ____________________ DATE ____________
(Registered Agent Accepting Appointment)

$1.00 additional fee required for Registered Agent changes

See signature restrictions under instructions on reverse side of this form

I certify That I Am An Officer of the Corporation or a Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. Officer signing must be listed in Block 6.

Signature: Jose A. Sanchez

Date: 1/31/87

Typed Name of Signing Officer: J. A. SANCHEZ

PRESIDENT

Telephone Number: (305) 620-5896

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

APPROVED

.FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

F62783
H Z J, INC.
~~W HILARIO LOPEZ~~
SUITE ~~10~~ 13, 1990 NW 183RD STREET
MIAMI, FL ~~33055~~ 33056

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 12/10/1981

4. Federal Employer Identification Number (FEIN):

5. Date of Last Report: 02/06/1987

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1987

	Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1	[redacted]	[redacted]	[redacted]	[redacted]
2	SANCHEZ, JOSE	P/D	STE ~~10~~ 13, 1990 NW 183RD ST	MIAMI, FL
3				
4				
5				
6				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SANCHEZ, JOSE
SUITE ~~10~~ 13, 1990 NW 183RD STREET
MIAMI, FL 33056

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82: SUITE 13, 1990 NW 183 STREET

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: MIAMI FL

Zip Code 85: 33056

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on: ______

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE ______ (Registered Agent Accepting Appointment) DATE ______

10. If a foreign corporation, date first transacted business in Florida ______

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer or Director signing must be listed in Block 6.)

Signature ______

Typed Name of Signing Officer or Director ______ Title: PRESIDENT

Date: 6/20/88

Telephone Number ______

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
1989 JUN 13 AM 10:57
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

P62783 8
H Z J, INC.
1990 NW 183 ST #13
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33056-3847

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 12/10/1981

4. Federal Employer Identification Number (FEIN): APPLIED FOR

5. Date of Last Report: 07/15/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
V/D	SANCHEZ, JOSE	1990 NW 183 ST #13	MIAMI, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SANCHEZ, JOSE
1990 NW 183 ST #13
MIAMI, FL 33056

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If this is a foreign corporation, state first transaction of business in Florida _____

See signature restrictions under instructions on reverse side of this form.

I Hereby Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
Officer or Director signing must be listed in Block 6.)

Signature of Officer or Director: JOSE SANCHEZ

Title: VICE PRESIDENT

Date: 6/5/89

Telephone Number

$5 Additional Fee required for a Certificate of Status

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

90 AUG 15 PM 5:55

Please Read the Instructions or Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

F62783 8

ZIP + 4 PRESORT

H Z J, INC.
1990 NW 183 ST #13
SUITE 10, 1990 NW 183RD STREET
MIAMI, FL 33056-3848

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida: 12/10/1981

4 FEI Number: APPLIED FOR 59-2464333

FEI Number Applied For
FEI Number Not Applicable

5 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
1	V/D	SANCHEZ, JOSE	1990 NW 183 ST #13	MIAMI, FL
1a				
2				
2a				
3				
3a				
4				
4a				
5				
5a				
6				
6a				

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

SANCHEZ, JOSE
1990 NW 183 ST #13
MIAMI, FL 33056

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FL.

Zip Code

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
The change was authorized by resolution duly adopted by its board of directors on _____

10 I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

11 I certify that the information indicated on this annual report or supplemental annual 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, F.S.

Signature: Jose Sanchez Date: 6/11/90

Typed or Printed Name of Signing Officer or Director: JOSE SANCHEZ Title: PRESIDENT Telephone Number:

$5 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

JUN 19 '91

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE.

1. Name and Mailing Address of Corporation: DOCUMENT # F62783 (8)

ZIP + 4 PRESORT

PURSUANT

H Z J, INC.
1990 NW 183 ST #13
~~SUITE 10, 1990 NW 183RD STREET~~
~~MIAMI, FL 33056-3848~~

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address: 1990 N.W. 183 STREET, SUITE 13,

22 P.O. Box No.:

23 City and State: OPALOCKA, FLORIDA

24 Zip Code: 33056

3. Date Incorporated or Qualified To Do Business in Florida: 12/10/1981

4. FEI Number: 59-2464333

FEI Number Applied For ☐

FEI Number Not Applicable ☐

5. $8.75 [illegible] CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
~~V/D/P~~	SANCHEZ, JOSE	1990 NW 183 ST #13	~~MIAMI~~, FL OPALOCKA

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SANCHEZ, JOSE
1990 NW 183 ST #13
~~MIAMI~~, FL 33056
OPALOCKA

8. Name and Address of New Registered Agent

81 Name:

82 Street Address 1 (Do NOT Use P.O. Box Number):

83 Street Address 2 (Do NOT Use P.O. Box Number):

84 City: FL. 85 Zip Code:

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify 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 6 or on an attachment with an address.

SIGNATURE Jose A Sanchez DATE 6/8/91

Typed Name of Signing Officer or Director: JOSE SANCHEZ

Title: PRESIDENT

Telephone Number Daytime: ( )

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status