

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G90617

1. Entity Name

JOMEK CORPORATION

FILED  
Apr 28, 2001 8:00 am  
Secretary of State

04-28-2001 90072 011 \*\*\*150.00

Principal Place of Business

1 SE 3RD AVE  
STE 2130  
MIAMI FL 33131  
US

Mailing Address

1 SE 3RD AVE  
STE 2130  
MIAMI FL 33131  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2394890

Applied For  
Not Applicable

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

COPROLITE CORP  
ONE SE THIRD AVENUE  
SUNTRUST INTERNATIONAL CTR STE 2130  
MIAMI FL 33131

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 ☐ \$5.00 May Be  
Trust Fund Contribution. Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	PTD									
	JACKSON, CARLA	1 SE 3RD AVE STE 2130	MIAMI FL 33131							
	VSD									
	CALVERT, YVONNE	1 SE 3RD AVE #2130	MIAMI FL 33131							

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:

*Carla Jackson*  
Carla Jackson  
President

4/9/01  
Date

305-377-9353  
Daytime Phone #

CR2E034 (10/00)