2000 UNIFORM BUSINESS REPORT (UBR) Aug 11, 2000 8:00 am Secretary of State **DOCUMENT # M50005** 1. Entity Name J.S. DROMI'& ASSOCIATES, INC. 08-11-2000 90094 014 ***158.75 Principal Place of Business Mailing Address 260 N.E. 183RD STREET 260 N.E. 183RD STREET NORTH MIAMI FL 33179 NORTH MIAMI FL 33179 A0072382 3. Mailing Address /8348 N.E. 2ND AVE 2. Principal Place of Business 183 48 N.E. 2ND AVE DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0032836 Not Applicable \$8.75 Additional 5. Certificate of Status Desired ÜSF 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DROMI DROMI, JAIME S Street Address (P.O. Box Number is Not Acceptable) 260 N.E. 183RD STREET NORTH MIAMI FL 33179 8. The above named entity submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. HARIO S. SIGNATURE ne of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Pavable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 TITLE Delete TITLE ☐ Change Addition NAME DROMI, JAIME S NAME STREET ADDRESS STREET ADDRESS 260 N.E. 183RD STRETT CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI FL 33179 ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TIT! F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change | Addition TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 officer use empowered.

SIGNATURE:

SIGNATUS PETULINED
SIGNATUS PARTIES NAME OF SIGNING OFFICER OF DIRECTOR

8/08/00

305-710-3007

Daytime Phone #

attachment pult: M50005 20072382

J.S. DROMI & ASSOC, INC 18348 N.E. 2nd AVE N.M.B. FLA 33179

Dear Sirs,

The reason we never filed the corporation report is that we moved to the above location last October/99 and we never received the renewal notice for the 2000 uniform business report. Enclosed please find the renewal form together with our check for the amount of \$ 158.75.

The second second

Thank ye