

2,002 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000017521

1. Entity Name

M. J. H. Corp.

APPROVED
AND
FILED

02 AUG 13 AM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100007170811--8

-08/16/02--01056--025

****150.00 ****150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4410 WEST 16 AVE

Suite, Apt. #, etc.

18

3. Mailing Address

5405 NW 72 AVE

Suite, Apt. #, etc.

-

City & State

HALEAH, FL

City & State

MIAMI, FL

FEI Number

65-0982675

Applied For

Not Applicable

Zip

33012

Country

USA

Zip

33166

Country

U.S.A

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

ANGELA A. PANDO

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

2604 W. 68 PL.

City

HALEAH

FL

Zip Code

33019-5404

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD.
HIRAM PINERO
2604 W. 68 PL.
HALEAH, FL. 33019-5404

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JD
ANGELA A. PANDO
2604 W. 68 PL.
HALEAH, FL. 33019-5404

TITLE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: X

Hiram Pinero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/22/02 (305) 888-7991

Date

Daytime Phone #

CR2E034B (12/01)