

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 900 000029266
1. Entity Name
JUPITER PLAZA ASSOCIATES, INC.

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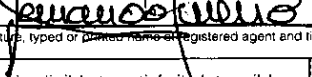
2. Principal Place of Business 2813 SW 129th AVE Suite, Apt. #, etc.		3. Mailing Address 2813 SW 129th AVE Suite, Apt. #, etc.	
City & State MIRAMAR, FL	City & State MIRAMAR, FL	4. FEI Number 65-0999823	Applied For Not Applicable
Zip 33027	Country BROWARD	Zip 33027	Country BROWARD

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7. Name and Address of Current Registered Agent
Name FERNANDO GIMENO
Street Address (P.O. Box Number is Not Acceptable)
2813 SW 129th AVE
City MIRAMAR FL Zip Code 33027

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  (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. ☐ 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	PRESIDENT MARIA VESITACION BURGOS 2813 SW 129th AVE MIRAMAR, FL 33027	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200008565162 10/24/02--01033--029 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIPRESIDENT FERNANDO GIMENO 2813 SW 129th AVE MIRAMAR, FL 33027	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 an officer empowered.

SIGNATURE:  FERNANDO GIMENO 10/16/02 3059862561
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)