

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000038468

1. Entity Name

JMN-RENOVATIONS CO. INC.

FILED

03 JAN -8 PM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2. Principal Place of Business

2279 S.W 132nd Ave.,

Suite, Apt. #, etc

3. Mailing Address

2279 S.W 132nd Ave

Suite, Apt. #, etc

DO NOT WRITE IN THIS SPACE

City & State

Miramar

City & State

Miramar FL

4. FEI Number

65-1002237

Applied For

Not Applicable

Zip

Country

Zip

Country

33027

33027

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

PENA, BRUNILDA

2279 S.W 132nd Avenue

Miramar FL 33027

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 of individual or corporate officer or director or authorized representative)

(NOTE: Registered Agent signature required when not notarized)

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, 2002 Fee will be \$550.00
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 PD
NAME CABADA, JUAN E
STREET ADDRESS 2279 S.W 132nd Avenue
CITY-ST-ZIP Miramar FL 33027 ☐ Delete

TITLE VP
NAME PENA, BRUNILDA
STREET ADDRESS 2279 S.W 132nd Avenue
CITY-ST-ZIP Miramar FL 33027 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
600009955756
01/08/03--01007--015 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (11/00)

January 3, 2003

Department of State
Division of Corporations
Tallahassee, FL 32314

Subject: JMN=Renovations Co., Inc.
Doc. Number P00000038468

This letter is in regards to the corporation annual for the 2002 filing year. We never received the report since the business address has changed and mail was lost or misplaced.

If we had received it, we would have sent the \$150.00 immediately.

Please accept this check of \$150.00 for the annual report 2002. Thank you very much for your cooperation.

Sincerely,

Juan e. Gabada
President