2001 UNIFORM BUSINESS REPORT (UBR)

Jul 25, 2001 8:00 am Secretary of State DOCUMENT # P0000051156 05-04-2001 90086 025 ***150 00 J AND JL PAINTING, CORP. Principal Place of Business Mailing Address 1411 SW 67 AVENUE APT 16 1411 SW 67 AVENUE APT 16 MIAMI FL 33144 MIAMI FL 33144 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ERNANDEZ HENRY LOPEZ, HENRY H Street Address (P.O. Box Number is Not Acceptable) 1411 SW 67 AVENUE APT 16 MIAMI FL 33 44 1411 GY AVENUE SW City submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The above named en! SIGNATURE (NOTE: Registered Agent signature required when reinstating) printed name of registered arrent and little if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **DPTS** ☐ Delete TITLE TITLE HERNADEZ, HENRY LOPEZ, HENRY H NAME NAME STREET ADDRESS 1411 SW 67 AVENUE APT 16 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33144** TITLE ☐ Detete TITLE ☐ Change : Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET_ADDRESS CITY-ST-ZIP CITY-ST-2iP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3(ii), Florida Statutes. I further certify that the information indicated on this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3(ii), Florida Statutes. I further certify that the information indicated on this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3(ii), Florida Statutes. I further certify that the information indicated on this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3(ii), Florida Statutes. I further certify that the information indicated on this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3(ii), Florida Statutes. I further certify that the information indicated on this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3(ii), Florida Statutes. I further certify that the information indicated on this report is filing that the information indicated on this report is filing that the information indicated on the information indic SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Davema Phone &

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