

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

2002 UNIFORM BUSINESS REPORT (UBR)

05-21-2002 91192 048 \*\*\*150.00

Document # P00000068776

JUSOL, INC.

2828 Coral Way #410

2828 Coral Way #410

Miami, Fl 33145

Miami, Fl 33145

DO NOT WRITE IN THI

FEI# 65-1025883

☐ \$8.75 Additional  
Fee Required

Name **Fausto Alvarez**

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

2828 Coral Way #410

City **Miami, Florida** **FL** Zip Code **33145**

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

11. OFFICERS AND DIRECTORS

TITLE  
NAME **D Fausto Alvarez**  
STREET ADDRESS **2828 Coral Way #410**  
CITY-ST-ZIP **Miami, Fl 33145**

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)