

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV 13 AM 9:32

SECRETARY OF STATE
TALLAHASSEE, FL 32301

200008972622
11/13/02--01069--019 **150.00



2002 UBR

DOCUMENT # P00000079385

1. Corporation Name

C & M JEWELERS INC.

Principal Place of Business

55 NE 1ST STREET
SUITE 2
MIAMI FL 33132

Mailing Address

55 NE 1ST STREET
SUITE 2
MIAMI FL 33132

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/22/2000

5. FEI Number

65-1033666

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	MONTESECOA, CESAR	55 NE 1ST STREET SUITE 2	MIAMI FL 33132

8. Name and Address of Current Registered Agent

MONTESECOA, CESAR
55 NE 1ST STREET
SUITE 2
MIAMI FL 33132

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11-8-02

CR2E040 (8/02)

2052

C& M JEWELERS INC

55 NE 1st Street Ste 2
Miami, FL 33132

August 2, 2001

Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Re: UBR Report for 2002

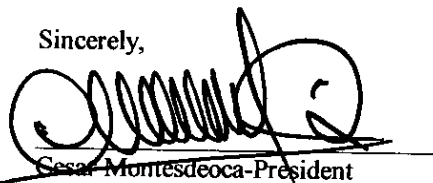
Dear State Representative:

Please allow this letter to serve as statement that we never received the first request for the \$150 annual 2002 UBR Report. We have not moved from our original location and all of our mail has been received on a timely basis.

Recently we received from you what appears to be a reinstatement request. Please accept this completed UBR form for the year 2002 along with a check totaling \$150 to cover our annual fee. If our explanation does not suffice then consider this as our request for an abatement of penalties.

Thank you in advance for your consideration and understanding in regards to this matter.

Sincerely,



Cesar Montesdeoca-President

Enclosure