

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 91008 038 ***150.00

DOCUMENT # P00000087203



1. Entity Name
V.T.J. MANAGEMENT & MAINTENANCE, INC.

Principal Place of Business
9310 FONTRINEBLEAU BLVD
SUITE 302
MIAMI FL 33172

Mailing Address
9310 FONTRINEBLEAU BLVD
SUITE 302
MIAMI FL 33172

2. Principal Place of Business
9330 FONTAINEBLEAU BLVD

3. Mailing Address
9330 FONTAINEBLEAU BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
MIAMI FLORIDA

City & State
MIAMI FLORIDA

4. FEI Number **65-1049405**

Applied For
Not Applicable

Zip **33172** **Country** **MIAMI-DADE**

Zip **33172** **Country** **MIAMI-DADE**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

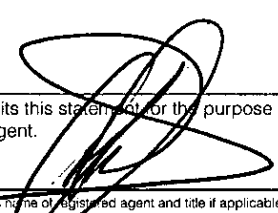
7. Name and Address of New Registered Agent

MARTIN, VIRGILIO
9310 FOUNTAINBLEAU #302
MIAMI FL 33172

Name **MARTIN, VIRGILIO**
Street Address (P.O. Box Number is Not Acceptable)
9330 FONTAINEBLEAU BLVD

City **MIAMI** **FL** **Zip Code** **33172**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE 
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/2/2003
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSD** ☐ **Delete**
NAME **MARTIN, VIRGILIO**
STREET ADDRESS **9310 FOUNTAINBLEAU #302**
CITY-ST-ZIP **MIAMI FL 33172**

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

TITLE **VTD** ☐ **Delete**
NAME **MARTIN, TERESITA**
STREET ADDRESS **9310 FOUNTAINBLEAU #302**
CITY-ST-ZIP **MIAMI FL 33172**

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

TITLE **D** ☐ **Delete**
NAME **MARTIN, JOSE-LUIS**
STREET ADDRESS **9310 FOUNTAINBLEAU #302**
CITY-ST-ZIP **MIAMI FL 33172**

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

TITLE **D** ☐ **Delete**
NAME **MARTIN, MIRIAM**
STREET ADDRESS **9310 FOUNTAINEBLEAU BLVD #302**
CITY-ST-ZIP **MIAMI FL 33172**

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

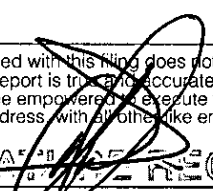
TITLE **D** ☐ **Delete**
NAME **MARTIN, JAVIER**
STREET ADDRESS **9310 FOUNTAINEBLEAU BLVD #302**
CITY-ST-ZIP **MIAMI FL 33172**

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

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **SIGNATURE REQUIRED** **4/2/2003** **(305) 229-1411**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)