

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90166 040 ***150.00

DOCUMENT # PQQQQQ110753

1. Entity Name

Jhoma International Company

Principal Place of Business	Mailing Address
714 N.W. 111th Pl. Suite 8 Miami, FL 33172	714 N.W. 111th Pl. Suite 8 Miami, FL 33172

2. Principal Place of Business	3. Mailing Address
8540 N.W. 6th Ln.	8540 N.W. 6th Ln.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Miami, FL	Miami, FL
Zip	Zip
33126	33126
Country	Country
U.S.A.	U.S.A.

4. FEI Number	Applied For
65-1058865	Not Applicable

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

DO NOT WRITE IN THIS SPACE

A0051261

6. Name and Address of Current Registered Agent

Rua, Jhon Jairo
 714 N.W. 111th Pl., Suite 8
 Miami, FL 33172

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
8540 N.W. 6th Ln.
City
Miami
FL
Zip Code
33126

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

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, 2001 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	D/P/T	<input type="checkbox"/> Delete
NAME	Rua, Jhon Jairo	
STREET ADDRESS	714 N.W. 111th Pl., Suite 8	
CITY - ST - ZIP	Miami, FL 33172	

TITLE	D/S	<input type="checkbox"/> Delete
NAME	Henao, Maria E.	
STREET ADDRESS	714 N.W. 111th Pl., Suite 8	
CITY - ST - ZIP	Miami, FL 33172	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8540 N.W. 6th Ln.	
CITY - ST - ZIP	Miami, FL 33126	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8540 N.W. 6th Ln.	
CITY - ST - ZIP	Miami, FL 33126	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY - ST - ZIP		

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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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:

Jhon Jairo Rua

Jhon Jairo Rua

03-22-01

305-264-6418

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #