2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P00000111649 **DOCUMENT #**



FILED Mar 10, 2003 8:00 am Secretary of State

1. Entity Name CESAR JIMENEZ INTERIORS, CORP.							03-10-2003	90142 034	***150	.00	
Principal Place of Business 1421 SW 16 AVE MIAMI FL 33145			1421 SW	Mailing Address 1421 SW 16 AVE MIAMI FL 33145							
2. Principal I	Place of Busin	ness	3. Mailing	3. Mailing Address							
Suite, Apt. #, etc.			Suite, A	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State			City & S	City & State			1 54-3586464		oplied For ot Applicable	7	
Zip	Zip Country		Zip	Zip Country		5.	5. Certificate of Status Desired F		8.75 Additional ee Required		
6. Name and Address of Current Reg				stered Agent			7. Name and Address of New Registered Agent				1
INTERIOR OFFICE					Name						
JIMENEZ, 1421 SW	16 AVE					Street Address (P.O. Box Number is Not Acceptable)					_
MIAMI FL	33145					· · ·			Zip Code	Δ	-
8. The above	e named entit	v submits this stateme	ent for the purpose	of changing its re	City	registered ag	ent, or both, in the State of Fl	FL orida Lam fam			-
the obliga	tions of regist	ered agent.	, .	0 0		-g				ana 2500pt	
SIGNATURE	Signature, typed	or printed name of registered	agent and title if applicab	le. (NOTE: F	Registered Agent signatur	e required when re	instaling)	DATE	 .		
Afte	r May 1, 200	I FEE IS \$150.00 3 Fee will be \$550 Florida Departme	.00		e e e e e e e e e e e e e e e e e e e		_9. Election.Campaign Fi Trust Fund Contribution			0 May Be to Fees	
10	12	OFFICERS /	AND DIRECTORS		11,	AD	DITIONS/CHANGES TO OFF	ICERS AND DI	RECTORS	3 IN 11	1_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JIMENEZ, (1421 SW 1 MIAMI FL 3	6 AVE	·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u></u>] Change	Addition	F034 (10/02)
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12. I hereby certify that the information supplied with this fijing 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 sypplemental 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 reqeiver 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 addition, with all other like empowered.

SIGNATURE:

SIGNA/UNICAZUUTRED