FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS**

2002 DOCUMENT # P01000003151 1. Corporation Name

YUJO ENTERPRISES, INC.

FILED May 01, 2002 8:00 am Secretary of State

05-01-2002 91566 040 ***150.00

543910

Principal Place of Business Mailing Address											
12275 NW 7 Mana						Ī					
13375 NW 7 Terr Same							DO NOT MOUTS IN THE SECOND				
Miami, F1. 33182						F	DO NOT WRITE IN THIS SPACE				
2 Dringing	Diagram of During						3. Date Incorporated or Qualifed 01/09/2001				
<u> </u>	Place of Business	2a. Mailing Address				1	4. FEI Number		A	pplied For	
21 Suito An	t # ata	26					65-1066198		N	ot Applicable	
22	Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certifcate of Status Desired	•		Additional	
	City & State City & State			> <u></u>			Fee Required				
23	28					6. Election Campaign Financing			May Be		
Zip	Country	Zip Cour				Trust Fund Contribution				to Fees	
24	25	29	30	uiiiiy	,		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No.				
	9. Name and Address of Current I		30	\top	-		Personal Property Tax. 10. Name and Address of New Registered	_		ØNo,	
		togiotal au rigant		81	Name		To. Name and Address of New Registered	ı Agen	<u>t</u>		
١ .	Jose M. Gonzalez										
	13375 NW 7th Terr			82	Street	Address	s (P.O. Box Number is Not Acceptable)				
	Miami, F1. 33182			83	-						
	, 121 00102			00							
				84	City		FI	85	Zip	Code	
11. Pursuani	t to the provisions of Sections 607.0502 a	and 607 1508. Florida Sta	futes the s	how	b-mamed	corporat	FI		1 14-		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE ✓											
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered)					nt signature re	equired whe	en reinstating) DATE	—			
12.	OFFICERS AND		13.		_		ADDITIONS/CHANGES TO OFFICERS A	ND DIF	RECTO	RS IN 12	
TITLE	Pres/VP/Treas/Sec	DELETE	1.1 TI	TLE				c	hange	☐ Addition	
NAME	Jose M. Gonzalez		1.2 N	AME						ĺ	
STREET ADDRESS	13375 NW 7th Terr		1.3 \$	TREET	ADDRESS					ļ	
CITY-ST-ZIP	Miami, F1. 33182		1.4 CI	ITY-SI	Γ- ZIP						
TITLE	120 00102	☐ DELETE	2.1 π	πE	ĺ				hange	☐ Addition	
NAME			2.2 N	AME							
STREET ADDRESS			2.3 \$1	TREET	ADDRESS						
CITY-ST-ZIP			-· 2.40	2.4 CITY-ST-ZIP							
TITLE	ĺ	☐ DELETE	3.1 TT	TLE				C	hange	☐ Addition	
NAME			3.2 N/	AME							
STREET ADDRESS			3.3 ST	REET	ADDRESS						
C/TY-ST-ZIP			3.4. C	ITY-\$1	T-ZIP						
TITLE		☐ DELETE	4.1 TIT	πE			-	C	hange	☐ Addition	
NAME			4, 2 N	AME						1	
STREET ADDRESS			4.3 ST	REET.	ADDRESS						
C/TY-ST-ZIP			4,4 CI	TY-ST	-ZIP		<u> </u>			ĺ	
TITLE	:	☐ DELETE		5.1 TITLE		· ·		Ch	ange	Addition	
NAME			5.2 NA	ME						}	
STREET ADDRESS			5.3 ST	REET	ADDRESS						
CITY-ST-ZIP			5.4 CII		-ZIP				•	•	
TITLE		☐ DELETE	6.1 TIT	UE _				☐ Ch	ange	Addition	
NAME			6.2 NA	ME							
STREET ADDRESS	•		6.3 STI	REET/	ADDRESS						
CITY-ST-ZIP			6.4 CIT	Y-ST-	ZIP					1	

14. 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 annual report or supplemental annual 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 on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or en an attachment with an address, with all other like empowered.

SIGNATURE:

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305216-6606

Daytime Phone #