

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91162 010 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000012436

1. Entity Name
JUNIOR WOOD FLOOR CORP.



90130191

Principal Place of Business
4701 SW 75 AVE
MIAMI, FL 33155

Mailing Address
4701 SW 75 AVE
MIAMI, FL 33155

2. Principal Place of Business
6350 SW 40 STREET
Suite, Apt. #, etc.

3. Mailing Address
6350 SW 40 STREET
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Miami FLORIDA
Zip
33155

Country
USA

City & State
Miami FLORIDA
Zip
33155

Country
USA

4. FEI Number
65-1085802

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GUZMAN, MARIO I
9010 SW 137TH AVE, SUITE 208
MIAMI, FL 33186

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 resigning)

DATE

FILE FILING FEE IS \$100.00
After May 1, 2003, it will be \$500.00.
Make Check Payable to Florida Department of State.

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
VARANDO, CLAUDIA S
5989 SW 128 CT
MIAMI, FL 33183 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
VALLALBA, FABIAN
9760 SW 133RD AVENUE #411
MIAMI, FL 33183 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
VALLALBA, NESTOR F.
6350 SW 40 STREET
Miami FLORIDA 33155 ☐ Change ☒ Addition

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

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

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

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

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

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 my address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FOR: VALLALBA

04-24-03 300-218-4483

CR2E034 (10/02)