

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2003 8:00 am
Secretary of State

0220790
AV

DOCUMENT # P01000022712

1. Entity Name
JEFERMAR CORPORATION



05-08-2003 90170 021 ***150.00

Principal Place of Business
12066 SW 131 AVE
MIAMI FL 33186
US

Mailing Address
245 SE 1ST STREET
SUITE 311
MIAMI FL 33131
US



2. Principal Place of Business

12109 SW 114 Place

3. Mailing Address

12109 SW 114 Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
MIAMI FL

City & State
MIAMI FL

4. FEI Number 65-1084817

Applied For
Not Applicable

Zip 33176 Country MIAMI DADE

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

6. Name and Address of Current Registered Agent

KALKAS, MARTTI
245 SE 1ST STREET
SUITE 311
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name ERNESTO VARGAS
Street Address (P.O. Box Number is Not Acceptable)
8480 SW 156 Place APT 602
City MIAMI FL Zip Code 33193

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)

DATE 3/13/03

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 Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD-T-S ☐ Delete
NAME VARGAS, ERNESTO
STREET ADDRESS 1159 SW 103 LANE
CITY-ST-ZIP MIAMI FL 33186

TITLE D-P-T-S ☒ Change ☐ Addition
NAME VARGAS, ERNESTO
STREET ADDRESS 8480 SW 156 PLACE APT 602
CITY-ST-ZIP MIAMI FL 33193

TITLE VPD ☒ Delete
NAME DALMASSO, MARIO
STREET ADDRESS 1159 SW 103 LANE
CITY-ST-ZIP MIAMI FL 33186

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

TITLE VPD ☒ Delete
NAME MANCINELLI, MARCELO
STREET ADDRESS 1159 SW 103 LANE
CITY-ST-ZIP MIAMI FL 33186

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

TITLE VPD ☒ Delete
NAME GULF, JORGE
STREET ADDRESS 1159 SW 103 LANE
CITY-ST-ZIP MIAMI FL 33186

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)