## **FILED** 2002 UNIFORM BUSINESS REPORT (UBR) May 20, 2002 8:00 am Secretary of State P01000053893 **DOCUMENT #** 1. Entity Name 05-20-2002 90070 011 \*\*\*150.00 J & J DISTRIBUTIONS, CORP. Mailing Address Principal Place of Business 9171 STERLING DRIVE 9171 STERLING DRIVE MIAMI FL 33157 MIAMI FL 33157 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEJ Number City & State City & State ĺ٠ Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired .Country Zip Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MONTOYA, MARIA R Street Address (P.O. Box Number is Not Acceptable) 11842 SW 210 STREET **MIAMI FL 33177** Zip Code FL City 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 it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 **\$5.00** May Be 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Added to Fees Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS (9/01) 11. ☐ Addition ☐ Change Delete TITLE TITLE NAME VILA. EDUARDO CR2E034 NAME STREET ADDRESS 9171 STERLING DRIVE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33157 CITY-ST-7IP PRESIDENT SV Presibent L'Change VILA, RICHARD É 9171 STERLING DRIVE NIAMI FLE 33157 ☐ Delete TITLE TITLE NAME VILA, RICHARD E NAME STREET ADDRESS 9171 STERLING DRIVE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33157** CITY-ST-ZIP ☐ Change --TITLE ☐ Delete TITLE MONTOYA, MARIA R NAME STREET ADDRESS 11842 SW 210 STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33177 CITY-ST-ZIP ☐ Addition Change Delete TITLE NAME VILA, JANET C NAME STREET ADDRESS 9171 STERLING DRIVE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33157** CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 REQUIRED

President 4-29-02.

Date Date Dayline Phone #