## 2002 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 17, 2002 8:00 am ~ Secretary of State 04-17-2002 90118 049 \*\*\*150.00

| 1 Entity Name                     |  |  |  | 04-17-2002 90118 049 1130.00   |   |  |
|-----------------------------------|--|--|--|--|---|--|
| JOMAR OF SOUTH FLORIDA, INC       |  |  |  |  |   |  |
| OUMAN (                           | JE SOUTH FHORT                                   | DA, INC                                      | 1  |  |   |  |
|                                   |  |  |  |  |   |  |
| n                                 | O NOT WRITE                                      | E IN THIC CD                                 | ACE .  | 83090  | 9   |  |
| יש                                | O NOT AND L                                      |  | AVL  | 09090  | 4   |  |
| 2 Principal P                     | None of Business                                 | 3. Mailing Address                           |  | <u> </u>   |   |  |
|                                   |  | 13430 SW 38                                  | 3 STREET   |  |   |  |
| Suite, Apt. #, etc.               |  | Suite, Apt. #, etc.                          |  | DO NOT WRITE IN THIS SPACE   |   |  |
| City & State                      |  | City & State                                 |  | 4. FEI Number Applied For  |   |  |
|                                   |  | MIAMI, FL                                    |  | 65-1129636   | Not Applicable  |  |
| Zip<br>33175                      | Country<br>USA                                   | <b>Zip</b><br>33175                          | Country<br>USA   | 5. Certificate of Status Desired   | \$8.75 Additional Fee Required  |  |
| 33173                             | Joba   |  |  | Name and Address of Current Register   |   |  |
|                                   |  |  | Name<br>PEREZ,   | JORGE  |   |  |
| DO NOT WRITE Street Address       |  |  |  | s (P.O. Box Number is Not Acceptable) W 38 ST  |   |  |
|                                   | IN THIS S  | DACE   | 13430 8  | SW 38 ST   |   |  |
|                                   | IN THIS S  | TACL   |  |  | 7in Code  |  |
|                                   |  |  | City<br>MIAMI  | F  | L Zip Code<br>FL  |  |
| 8. The above                      | named entity submits this state                  | ment for the purpose of chang                | ing its registered office or   | registered agent, or both, in the State of Flo   | rida.   |  |
|                                   |  |  |  |  |   |  |
| SIGNATURE                         | Signature, typed or printed name of              | registered agent and title if applicat       | ole. (NOTE: Registered A   | Agent signature required when reinstating)   | DATE  |  |
| 9 This corns                      | pration is eligible to satisfy its Int           |  | - May 1 Fee is \$150.00  |  | <b>45.00</b>  |  |
|                                   | equirement and elects to do so.                  | - International Parties                      | sy 1, Fee is \$550.00<br>ded UBR is \$61.25  | <ol> <li>Election Campaign Financing<br/>Trust Fund Contribution.</li> </ol>                 | \$5.00 May Be Added to Fees   |  |
| (See criter                       | ria on back)                                     | Make Check Pay                               | able to Department of St   |  |   |  |
| ·11. •                            |  | ND DIRECTORS                                 | 191000000000000000000000000000000000000  |  | 6   |  |
| TITLE<br>NAME                     | PD<br>PEREZ, JORGE                               |  | TITLE<br>NAME  |  | (1)   |  |
| STREET ADDRESS                    | 13430 SW 38 S                                    | Т  | TITLE COST: STREET ADDRESS CITY - ST - ZIP COST: ST |  |   |  |
| CITY - ST - ZIP                   | MIAMI, FL 33175                                  |  | CTTY - ST - ZIP  | 260  |   |  |
| TITLE                             | SD   | 7\   | TITLE OF CONTROL OF CO |  |   |  |
| NAME<br>STREET ADDRESS            | PEREZ,MARTHA<br> 13430 SW 38 S                   |  | STREET ADDRESS   |  |   |  |
| CITY - ST - ZIP                   | MIAMI, FL 3317                                   |  | CITY - ST - ZIP  |  |   |  |
| TITLE                             | V  |  | TITLE  |  |   |  |
| NAME<br>STREET ADDRESS            | RODRIGUEZ, FR<br>13430 SW 38 S                   | ANCISCO O                                    | NAME<br>STREET ADDRESS   | DO NOT WOLLE   |   |  |
| CITY - ST - ZIP                   | MIAMI, FL 33175                                  |  | CITY : ST - ZIP:   | DO NOT WRITE   |   |  |
| TITLE                             | T  |  | TITLE  | IN THIS SPACE  |   |  |
| NAME                              | RODRIGUEZ, MARTA<br>  13430 SW 38 ST             |  | NAME<br>STREET ADDRESS   |  |   |  |
| STREET ADDRESS<br>CITY - ST - ZIP | MIAMI, FL 33175                                  |  | CITY - ST - ZIP  |  |   |  |
| TITLE                             | 111111111111111111111111111111111111111          | <u>,                                    </u> | TITLE  |  |   |  |
| NAME                              | 1  |  | NAME   |  |   |  |
| STREET ADDRESS                    | \<br>  |  | STREET ADDRESS   |  |   |  |
| CITY - ST - ZIP                   | <del>                                     </del> |  | CITY - ST - ZIP  |  | 9199, 201990, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 201990, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 201990, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 201990, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 201990, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 20199, 201990 |  |
| TITLE                             | 1  |  | NAME   |  |   |  |
| STREET ADDRESS                    | \  | 1  | STREET ADDRESS   |  |   |  |
| CITY - ST - ZIP                   | <u> </u>   |  | CITY+ST-ZIP  | d in Continu 110 07/3\(i) Elected Statutes I   | further certify that the  |  |
| informatio                        | n indicated on this report of suin               | ntemental report is true and ac              | curate and that my signati   | d in Section 119.07(3)(i), Florida Statutes. I ure shall have the same legal effect as if ma | ade under oath; that t am   |  |
| an officer                        | or director of the corporation of                | the receiver or trustee empowe               | ered to execute this report  | as required by Chapter 607, Florida Statute  | s; and that my name   |  |

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #