

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2002 8:00 am
Secretary of State

04-22-2002 90192 003 ***150.00

DOCUMENT # P01000096916

1. Entity Name

ALOJESSMAR'S KITCHEN & MORE, INC.

Principal Place of Business

15639 SW 100TH TERRACE
 MIAMI FL 33196

Mailing Address

15639 SW 100TH TERRACE
 MIAMI FL 33196

2. Principal Place of Business

9967 SW 142 AVENUE

3. Mailing Address

9967 SW 142 AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

4. FEI Number

65-1143655

Applied For

Not Applicable

Zip

33186

Country

USA

Zip

33186

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Perez, Omar

15639 SW 100TH TERRACE
 MIAMI FL 33196

7. Name and Address of New Registered Agent

Name

FRIEDFELD & CORADAN, P.A.

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

GOVERNORS SQUARE

8100 OAK LANE, SUITE 300

City

MIAMI LAKES

FL

Zip Code

33016

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]
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/9/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete
 P PEREZ, OMAR
 STREET ADDRESS 15639 SW 100TH TERRACE
 CITY-ST-ZIP MIAMI FL 33196

TITLE NAME ☐ Delete
 VS PEREZ, JESSICA
 STREET ADDRESS 15639 SW 100TH TERRACE
 CITY-ST-ZIP MIAMI FL 33196

TITLE NAME ☐ Delete
 T. SHELTON, MICHELLE M
 STREET ADDRESS 15639 SW 100TH TERRACE
 CITY-ST-ZIP MIAMI FL 33196

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☒ Change ☐ Addition
 SAME
 STREET ADDRESS 9967 SW 142 AVENUE
 CITY-ST-ZIP MIAMI FL 33186

TITLE NAME ☒ Change ☐ Addition
 SAME
 STREET ADDRESS 9967 SW 142 AVENUE
 CITY-ST-ZIP MIAMI FL 33186

TITLE NAME ☒ Change ☐ Addition
 SAME
 STREET ADDRESS 9967 SW 142 AVENUE
 CITY-ST-ZIP MIAMI, FLORIDA 33186

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

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

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 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:

[Signature] JESSICA PEREZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/02 (305) 408-2330

Date

Daytime Phone #

CR2E034 (9/01)