

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91523 010 ***150.00

DOCUMENT # P01000115596 *N/C AM*

1. Entity Name

~~JESSY BEAUTY DIST, INC.~~ *Jessy Enviro. INC*

Principal Place of Business

5410 NW 107TH AVENUE
 UNIT 508
 MIAMI FL 33178

Mailing Address

5410 NW 107TH AVENUE
 UNIT 508
 MIAMI FL 33178

2. Principal Place of Business

2036 NE 8 St

3. Mailing Address

2036 NE 8 St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Homestead, FL

City & State

Homestead, FL

Zip

33033

Country

USA

Zip

33033

Country

USA

4. FEI Number

65-1158157

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ARDILA, TERESA
 5410 NW 107TH AVENUE
 UNIT 508
 MIAMI FL 33178

7. Name and Address of New Registered Agent

Name

Herrero, Mauricio

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

1406 East Mowry Drive #102

City

Homestead

FL

Zip Code

33030

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)

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	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	ARDILA, TERESA	5410 NW 107TH AVENUE UNIT 508	MIAMI FL 33178	<input type="checkbox"/>
VD	HERRERA, MAURICIO	5410 NW 107TH AVENUE UNIT 508	MIAMI FL 33178	<input type="checkbox"/>
TD	HERRERA, JESSICA	5410 NW 107TH AVENUE UNIT 508	MIAMI FL 33178	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
VP/D	Ardila, Teresa	5410 NW 107 Ave Unit 508	Miami, FL 33178	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VP/D	Herrera, Mauricio	1406 East Mowry Dr. #102	Homestead, FL 33030	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
P/D	Herrera Gloria Marcela	3008 NE 210 St	Aventura, FL 33180	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T/D	Micuita, Jessica A	1406 East Mowry Dr. #102	Homestead, FL 33030	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)