2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 11, 2002 8:00 am
Secretary of State
05-06-2002 90067 034 ***150.00

DOCUMENT # P01000119754

1. Entity Name
JOMAR INVESTMENTS GROUP OF FLORIDA, INC.

Principal Place of Business	Mailing Address
SEGREDO & WEISZ, ATTORNEYS AT LAW	SEGREDO & WEISZ, ATTORNEYS AT LAW
901 PONCE DE LEON BLVD., SUITE 601	901 PONCE DE LEON BLVD., SUITE 601
CORAL GABLES FL 33134	CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
5005 Collins Avenue		5005 Collins Avenue	
Suite, Apt. #, etc.: Apt. 725		Suite, Apt. #, etc.: Apt. 725	
City & State: Miami Beach, Florida 33040		City & State: Miami Beach, Florida 33040	
Zip	Country	Zip	Country

4. FEI Number 82-0552143 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SEGREDO, FRANK J ESQ
SEGREDO & WEISZ, ATTORNEYS AT LAW
901 PONCE DE LEON BLVD., SUITE 601
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name: Angelina Victoria Cortes Hernandez
Street Address (P.O. Box Number is Not Acceptable): 5005 Collins Avenue
Apt. 725
City: Miami Beach, Florida FL Zip Code 33040

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] Angelina V. Cortes Hdz. April 20/2002
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	D	☐ Delete
NAME	GUTIERREZ, JORGE CORTES	
STREET ADDRESS	5005 COLLINS AVENUE APT. 725	
CITY-ST-ZIP	MIAMI BEACH FL 33040	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change	☐ Addition
NAME			
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STREET ADDRESS			
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TITLE		☐ Change	☐ Addition
NAME			
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] Jorge Cortes Gutierrez April 20/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #