

# FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 NOV -6 PM 2:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000006724

1. Entity Name

J.H.F. INTERNATIONAL, INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

12350 SW 132 Ct.

3. Mailing Address

3 Suite, Apt. #, etc.  
207

Suite, Apt. #, etc.

City & State  
MIAMI, FL.

City & State

4. FEI Number

03-0430978

Applied For

Not Applicable

Zip  
33186

Country  
DADE

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
YOLANA JARAMILLO

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

12350 SW 132 Ct. # 207

City MIAMI, FL.

FL

Zip Code  
33186

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

10/29/03

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME JORGE HERNANDEZ  
STREET ADDRESS 9110 Fountainbleau Blda.  
CITY-ST-ZIP Miami, FL. 33172

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PVD  
NAME IVONNE HERNANDEZ  
STREET ADDRESS 9110 Fountainbleau Bldv.  
CITY-ST-ZIP MIAMI, FL. 33172

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME PAOLA HERNANDEZ  
STREET ADDRESS 9110 Fountainbleau Bldv.  
CITY-ST-ZIP Miami, FL. 33172

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

12. 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 10 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

10/29/03

Date

Daytime Phone #

CR2E034B (12/02)

**DO NOT WRITE  
IN THIS SPACE**

300024488323  
11/06/03--01048--018 \*\*150.00

Miami October 29, 2003

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL. 32314


J.H. F. International Inc.  
Document # P02000006724

To Whom It May Concern:

With this letter I would like to inform you that I never received the UBR 2003, due to the fact that the company moved location. I would like to request to please waive the penalty for the above-mentioned corporation. Enclosed please find the UBR 2003 and the check in the amount of \$150.00

Thank you for your cooperation and please excuse the inconvenience.

Regards,

  
Jorge Hernandez  
President