

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000054052

1. Entity Name
C, J & C SALES INC.



Principal Place of Business
**2401 SW 31 AVENUE
NA-16
PEMBROKE PARK, FL 33009**

Mailing Address
**2401 SW 31 AVENUE
NA-16
PEMBROKE PARK, FL 33009**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number
01-0667660

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**DELGADO, DINO
1360 N.E. 130 STREET
NORTH MIAMI, FL 33161**

7. Name and Address of New Registered Agent

Name **Delgado, Patricia**

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

1360 NE 130 Street

City **North Miami**

FL

Zip Code **33161**

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]

Patricia Delgado

11-20-2003

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

(NOTE: Registered Agent's signature required when reappointing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 11, 2003 Fee will be \$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 ☐ Delete
NAME **PV**
STREET ADDRESS **DELGADO, DINO**
CITY-ST-ZIP **1360 NE 130 STREET
NORTH MIAMI, FL 33161**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME **President**
STREET ADDRESS **Delgado, Patricia**
CITY-ST-ZIP **1360 N.E. 130 street
North Miami, FL 33161**

TITLE ☐ Change ☒ Addition
NAME **Vice President**
STREET ADDRESS **Sancho, Saich**
CITY-ST-ZIP **1360 NE 130 street
North Miami, FL 33161**

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

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

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

TITLE ☐ Change ☐ Addition
NAME
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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an agreement with all other like empowered.

SIGNATURE:

[Signature]

Patricia Delgado

**(786) 546-6448
11-20-2003**

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

FILED
03 NOV 26 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA