

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

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90104 018 ***158.75

DOCUMENT # P02000082841

1. Entity Name

J.Flores Painting, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
8750 NW 32 Court

Suite, Apt. #, etc.

3. Mailing Address
8750 NW 32 Court

Suite, Apt. #, etc.

City & State
Miami, Florida

City & State
Miami, Florida

Zip
33147

Country
Dade

Zip
33147

Country
Dade

4. FEI Number
04-3706893

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

90069283

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Santos J. Flores

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

8750 NW 32 Court

City Miami

FL

Zip Code
33147

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, typed or printed name of registered agent and fee if applicable.

Director

03/31/2003

DATE

(NOTE: Registered Agent signature required when nonattesting)

January 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 NAME STREET ADDRESS CITY-ST-ZIP	Director Santos J. Flores 8750 NW 32 Court Miami, FL 33147
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Santos J. Flores, Director

03/31/2003

DATE

DRYING PHONE #

CR2E034B (12/02)