

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90210 020 ***150.00

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

DOCUMENT # P02000104425		
1. Entity Name JULGO BUSINESS CONSULTANTS, INC.		
Principal Place of Business 14560 BALGOWAN ROAD MIAMI-LAKES, FL 33016 US		Mailing Address 14560 BALGOWAN ROAD MIAMI-LAKES, FL 33016 US
2. Principal Place of Business 19026 NW 78ct		3. Mailing Address 19026 NW 78ct
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State MIAMI, FLORIDA		City & State MIAMI, FLORIDA
Zip 33016	Country USA	Zip 33016
Country USA		
4. FEI Number 65-0886240		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent GOMEZ, DAVID E 14560 BALGOWAN ROAD MIAMI-LAKES, FL 33016		7. Name and Address of New Registered Agent Name DIEGO GOMEZ Street Address (P.O. Box Number is Not Acceptable) 19026 NW 78ct City MIAMI FL Zip Code 33016
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 <u>DIEGO GOMEZ</u> PRESIDENT DATE <u>4/29/03</u> Signature, title, or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when changing.)		
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	P GOMEZ, DAVID 14560 BALGOWAN ROAD MIAMI-LAKES, FL 33016 ☒ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARTAGENA, RAQUEL 14560 BALGOWAN ROAD MIAMI-LAKES, FL 33016 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	VP RAQUEL CARTAGENA 14441 NW 83rd AVE. MIAMI-LAKES, FL 33016 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>DIEGO GOMEZ</u> President DATE <u>4/29/03</u> 305.829.0669 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

CR02034 (10/02)