FILED
Apr 04, 2003 8:00 am
Secretary of State

03-17-2003 90462 009 ***158.78

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FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000114845

1. Entity Name

Joant & Luc Group, Corp.

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2. Principal Place of Business	3. Mailing Address
780 NW 42 AVE	
Suite, Apt. #, etc. 516	Suite, Apt. #, etc. Same
City & State Miami, FL.	City & State
Zip 33126 Country U.S	Zip Country

4. FEI Number 16-1618462 — Applied For / Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Aurelio Piedra, CPA

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

780 NW 42 AVE Ste 516

City Miami FL Zip Code 33126

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 X — 2-19-03

Signature required and 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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	Johnny Abdelamarco 780 NW 42 AVE ste 420 Miami FL. 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Elvia L Mendez 780 NW 42 AVE ste 420 Miami, FL. 33126
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: X — 2-19-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #