## FILED 2003 FOR PROFIT CORPORATION Mar 03, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBI P02000120427 **DOCUMENT #** 1. Entity Name 03-03-2003 90456 006 \*\*\*150.00 A & A JUMPING & JUMPING, INC. Principal Place of Business Mailing Address 2274 WEST 80 STREET 2274 WEST 80 STREET SUITE # 2 SUITE # 2 HIALEAH FL 33016 HIALEAH FL 33016 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HERRERA, JOSE C Street Address (P.O. Box Number is Not Acceptable) 2274 WEST 80 STREET SUITE # 2 HIALEAH FL 3016 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable ered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 2 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change HERRERA, JOSE C Addition NAME STREET ADDRESS 2274 WEST 80 STREET - SUITE # 2 STREET ADDRESS HIALEAH FL 33016 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete\_ TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

☐ Delete

1/21/03 786-306-SO

☐ Change

Change

☐ Change

■ Addition

☐ Addition

☐ Addition

CR2E034 (10/02)