

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90164 009 ***150.00

DOCUMENT # P02000134640

1. Entity Name

TABACALERA J.E.M. CORP.



Principal Place of Business

6993 N.W. 82TH AVE.

BAY #18

MIAMI FL 33166

Mailing Address

6993 N.W. 82TH AVE.

BAY #18

MIAMI FL 33166

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State /

City & State

Zip

Country

Zip

Country

4. FEI Number

02-0664028

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOMEZ, EDEL

6993 N.W. 82TH AVE.

BAY #18

MIAMI FL 33166

Name

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

City

FL

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 the obligations of registered agent:

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

07-07-03

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **GOMEZ, EDEL**
STREET ADDRESS **1855 WEST 62ND STREET APT. 333**
CITY-ST-ZIP **HIALEAH FL 33012**

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

TITLE **SD** ☐ Delete
NAME **GOMEZ, JOEL**
STREET ADDRESS **12745 SW 72ND TERRACE**
CITY-ST-ZIP **MIAMI FL 33175**

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

TITLE **TD** ☐ Delete
NAME **PALACIOS, MARIO W**
STREET ADDRESS **1550 N.W. 122ND STREET**
CITY-ST-ZIP **NORTH MIAMI FL 33168**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
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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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE REQUIRED

MARIO PALACIOS

07-07-03

305-502-3884

CR2E034 (4/03)

Attachment

TABACALERA J.E.M. CORP
6993 N.W. 82 AVE BAY #18
MIAMI, FLA 33166
(305)640-2454 fx (305)640-0747
Mario@tabacalerajem.com

90142042
~~#P02000134640~~

To Whom it may concern,

This to inform you that our company was open at the end of December 2002, and we never received the first notice for Document#P02000134640
To be able to file, this is the first notice that we get, please can you check your system to see what happen.

If you need to reach me you can call me at (305)502-3884

Mario W. Palacios



TD