

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2004 8:00 am
Secretary of State

05-20-2004 90006 031 ***150.00

66432375



03112003 Chg-P CR2E034 (10/03)

4. FEI Number **06-167 8367** 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

CARBAJAL, MAURICIO
2468 NW 35 STREET
MIAMI, FL 33142

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 _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

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 NAME STREET ADDRESS CITY-ST-ZIP	P CARBAJAL, MAURICIO 2468 NW 35 STREET MIAMI, FL 33142	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RUIZ, CARMEN-X 2468 NW 35 STREET MIAMI, FL 33142	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: _____ Date **05/12/04** Daytime Phone # **786-942-2455**

Attachment

J & J SOLUTIONS, INC
2468 NW 35 STREET
MIAMI, FL 33142

66432375

May 17, 2004

Division of Corporations
409 East Gaines Street
Tallahassee, FL. 32399

Ref: Uniform Business Annual Report

Doc #P03000008970

Please be advised that we have not received the Uniform Business Report for this year, reason for which is filing this now. Enclosed check in the amount of \$150.00 and form.

Thank you, for your attention to this matter.

Sincerely yours,


Mauricio Carbajal
President