## 2003 FOR PROFIT CORPORATION

## May 02, 2003 8:00 am & Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P94000010317 DOCUMENT # 05-02-2003 90383 026 \*\*\*158.75 1. Entity Name JAWAT, INC. Mailing Address Principal Place of Business 2001 S.W. 67TH AVE. 2001 S.W. 67TH AVE. MIAMI FL 33155 **MIAMI FL 33155** US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0469480 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 GUERREIRO, ENRIQUE J Street Address (P.O. Box Number is Not Acceptable) 5510 S.W. 2ND STREET MIAMI FL Zip Code City 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE ☐ Change ☐ Addition TITLE GUERREIRO, ENRIQUE J NAME NAME 5510 S.W. 2ND STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33144 CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition CRIADO, JOSE RAMON NAME NAME 5510 S.W. 2ND STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33144 CITY-ST-ZIP CITY-ST-ZIP \_TITLE\_\_\_\_ ☐ Delete TITLE ☐ Change Addition . . . . . . . NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete TITLE Change Addition TITLE

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.

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME STREET ADDRESS

NAME

P. ENRIQUE J. GUERREIRD

☐ Delete

☐ Delete

Change

☐ Change

**FILED** 

☐ Addition

Addition