2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P940

P94000080899

1. Entity Name J.C.J., II, CORP.



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

02-14-2003 90187 045 ***150.00

C/O COLONIAL PRESS INTERNATIONAL INC. C/O 3690 NW 50TH STREET 369			Mailing Address C/O COLONIAL PRESS INTERNATIONAL INC. 1690 NW 50TH STREET MIAMI FL 33142 JS							
2. Principal Pla	ce of Business	3. Mailing	Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Suite, Apt. #, etc. Suite, Apt. #, etc.							CHECK HERE IF MAKING CHANGES			
City & State		City & State				4. FE	65-0543289	mber 65-0543289 Applied For Not Applicable		
Zip Country - Zip			-Zip Cour			5. C	5. Certificate of Status Desired			
			1				7. Name and Address of New Registered Agent			
6. Name and Address of Current Registered Agent					Name					
AXMAN, MICHAEL B ESQ 2601 SOUTH BAYSHORE DRIVE, SUITE 1600 MIAMI FL 33133				Street Address (P.O. Box Number is Not Acceptable)						
					City	FL Zip Code				
the obligation	ons of registered ages. Signature, typed or printed name of registered agent a				ed Agent signature n		ent, or both, in the State of Florida. I am fai instating) DATE 9. Election Campaign Financing		O May Be	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							Trust Fund Contribution.	Added	to Fees	
Make Check Payable to Florida Department 10 OFFICERS AND DIRECTORS 1						AD	DITIONS/CHANGES TO OFFICERS AND	DIRECTORS		
10. TITLE NAME STREET ADDRESS	DP GOMEZ, JOSE A 3690 NW 50TH STREET		Delete TIT NAI		LE			☐ Change	Addition	
CITY-ST-ZIP	DVST		☐ Delete	TIT				☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP ~	GARCIA, CARLOS 3690 N.W. 50TH STREET MIAMI-FL 33142	_ :	ست جسیج . تید	ST	REET ADDRESS TY-ST-ZIP	<u>ئے۔۔۔۔</u>			Addition	
TITLE NAME		-	☐ Delete	N/	TLE AME TREET ADDRESS			ш слалуе	L1 Addition	

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 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 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 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 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 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 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 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 indicated on this report as 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 indicated on this report as 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 indicated on this re

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NAME 1

TITLE NAME

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V.P.

305-633-1381

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Daytime Phone #

CR2E034 (10/02)

Addition

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