

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90586 046 ***150.00

DOCUMENT # P95000007323

1. Entity Name

JESEMCA INT'L TRADING, INC.

Principal Place of Business

12135 SW 131 AVE.
MIAMI FL 33186
US

Mailing Address

12135 SW 131 AVE.
MIAMI FL 33186

2. Principal Place of Business

318 INDIAN TRACE

3. Mailing Address

318 INDIAN TRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WESTON, FL.

City & State

WESTON, FL.

4. FEI Number

65-0553576

Applied For

Not Applicable

Zip

Country

33326

Zip

Country

33326

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

ABONDANO, JAIRO
11683 SW 143 AVE
MIAMI FL 33186

Name

JAIRO ABONDANO
Street Address (P.O. Box Number is Not Acceptable)
318 INDIAN TRACE

City

WESTON

FL

Zip Code

33326

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/7/01

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **ABONDANO, JAIRO A**
STREET ADDRESS **11683 SW 143 AVE.**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE **P** ☒ Change ☐ Addition
NAME **JAIRO ABONDANO**
STREET ADDRESS **318 INDIAN TRACE**
CITY-ST-ZIP **WESTON, FL. 33326**

TITLE **VP** ☐ Delete
NAME **MERCEDES, MARIA**
STREET ADDRESS **11683 SW 143 AVE.**
CITY-ST-ZIP **MIAMI FL 33186**

TITLE **VP** ☒ Change ☐ Addition
NAME **MARIA MERCEDES ABONDANO**
STREET ADDRESS **318 INDIAN TRACE.**
CITY-ST-ZIP **WESTON, FL. 33326**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

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CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-2001

CR2E034 (10/00)