SIGNATURE:

				<i>t</i> — — - ,						
DOCUI	MENT # P9700005518	34	, .			Mech				,
JERSEY MACHINE SHOP INC						THIS OF CORPORATIONS				
Principal Plac	e of Business	Mailing Address				01 DEC 26 PM 12: 34				
4311 WEST SOUTH AVE 4311 WEST SO TAMPA FL 33614 TAMPA FL 336										
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State			FEI Number 9-3455652		<u> </u>	plied For ot Applicable		
Zip Country		Zip Coun		try		5. Certificate of Status Desired				7
	6. Name and Address of Current Re	egistered Agent			7. 1	Name and Address of New Rec	istered Age	ent		1
то				Name						
TORRES, JULIO A 4311 WEST SOUTH AVE			-	-Street Addre	ess (P.OB	Box Number-is:Not.Acceptable)				7
	MPA FL 33614	ı	•	11	J		* 2.4		<u> </u>	1
				City			<u>-</u>	Zip Code		-
				J Only			FL			_
8. The above	named entity submits this statement for t	he purpose of changing its	registere	ed office or reg	istered ag	ent, or both, in the State of Florid	ia.			
CICNATURE				•						
SIGNATURE _	Signature, typed or printed name of registered agent and	title if applicable. (NOTE	: Registere	d Agent signature re	quired when re	einstating)	DATE			
9. This corpo	ration is eligible to satisfy its Intangible	! FEE	IS \$150.00		40 Floring Compaign Figure 2					
Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta				10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. □ Added to Fees				
11.	OFFICERS AND DI	RECTORS	12.		AD	DITIONS/CHANGES TO OFFIC	ERS AND DI	RECTORS	S IN 11	1_
THILE	DP	Delete	TITLE	1] Change	☐ Addition	2E034 (11/00)
NAME STREET ADDRESS	TORRES, JULIO A		NAM STRE	ET ADDRESS						17
CITY-ST-ZIP	4311 WEST SOUTH A	VE		-ST-ZIP						E3
TITLE	TAMPA, FL 33614	☐ Delete	TITLE] Change	Addition	
NAME	DS		NAM							
STREET ADDRESS CITY-ST-ZIP	TORRES, ELSA			ET ADDRESS -ST-ZIP		5000047 -07107	555	55,	2	
TITLE	4311 WEST SOUTH A	VE □ Delete	TITLE						∐_Ağıtition	1
NAME	TAMPA, FL 33614	□ Delete	NAMI	1		4-4-4-4-1.∏€).UU #	Thurston	Ort Orthon	
STREET ADDRESS				ET ADDRESS						
CITY_SI-ZIP			[]	ST-ZIP		······································		1.0		-
TITLE NAME		☐ Delete	TITLE NAMI				L] Change	Addition	
STREET ADDRESS			3	ET ADDRESS				,		
CITY-ST-ZIP			CITY-	-ST-ZIP			•			
TITLE		☐ Delete	TITLE	i			^] Change	☐ Addition	
NAME STREET ADDRESS			NAME STRE	ET ADDRESS		V	$\lambda \lambda_{a}$			
CITY-ST-ZIP				ST-ZIP		#	8/11.	/		
TITLE	-	☐ Delete	TITLE				7	Change	Addition]
NAME STREET ADDRESS	,		NAME							
CITY-ST-ZIP			R .	ET ADDRESS ST-ZIP						
13. I hereby c	ertify that the information supplied with th	is filing does not qualify for	the exer	nption stated i	n Section	119.07(3)(i), Florida Statutes. I fu	rther certify	that the in	formation	1
of the corp	on this report or supplemental report is tri poration or the receiver or trustee empower or on an attachment with an address, with	ered to execute this report a	y signat as requir	ure snall have ed by Chapter	tne same I 607, Florid	legal effect as it made under oat da Statutes; and that my name a	n; that I am a ppears in Bl	an officer of ock 11 or	Block 12 if	

/2-21-0/ 81387037// Date Daytime Phone # JERSEY MACHINE SHOP,INC. P.O. BOX 15814 TAMPA, FL.33684

EIN 59-3455652

Florida Department of State Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

November 16, 2001

To Whom It May Concern;

Enclosed you will find check in the amount of \$150.00 for my annual fee. We never received any motice I do not know if that notice lost in the mail or delivered to another address in error because our mail address is P.O.Box 15814, Tampa, Fla.33684.

Please I hope this will take care of this matter and if there are any late charges or etc.,that You would please excuse us and delete them.

Thanking you in advance for handling this matter.

Julio Tomes S