2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P97000075239

1. Entity Name

JILK ENTERPRISES INC.



01-13-2003 90102 004 ***150.00

				No.	EUS!				
Principal Place of Business 7280 NW 8 ST. MIAMI FL 33126 US			Mailing Address P.O. BOX 558087 MIAMI FL 33255			I (ENIJER) (12 (BU) (BZ)) BÇIQ BÇIQ BANA BANA	147 1364: 4 14 0		
2. Principa	l Place of Business	3. M	ailing Address						
								100 UHA 1811 IBBI	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
	City & State		City & State					Applied For	
Zip	Country	Zip)	Country		5. Certificate of Status Desired	\$8.75 A	Not Applicable	
	6. Name and Address of Curre	nt Register	ed Agent			7. Name and Address of New Registere	Fee Requi	red	
0001741	F7 1000m			Name		The state of the s	u Agent -		
GONZALEZ, JORGE 7280 NW 8TH STREET				Street Add	lress (P.0	(P.O. Box Number is Not Acceptable)			
Miami fi	L 33126				-				
Tr.				City		F	Zip Co		
8. The above the obligation of	e named entity submits this statement ations of registered agent.	for the purp	oose of changing its	s registered office or re	gistered	d agent, or both, in the State of Florida. I an	n familiar with	n, and accept	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if apr	dicable (NOT	TÉ: Registered Agent signature r					
	FILE NOW!!! FEE IS \$150.00			- negistered Agent signature r	equirea wn	en reinstating) DATE			
Ąfte	er May 1, 2003 Fee will be \$550.00 k Payable to Florida Department	of State				Election Campaign Financing Trust Fund Contribution.	\$5. €	00 May Be ed to Fees	
10.	OFFICERS AN	D DIRECTO	RS	11.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	2S IN 11	
TITLE	PD CONTALEZ JODGE		☐ Delete	TITLE			☐ Change		
NAME • STREET ADDRESS	GONZALEZ, JORGE 7280 NW 8TH STREET			NAME STREET ADDRESS				☐ Addition	
CITY-ST-ZIP	MIAMI FL 33126			CITY-ST-ZIP				1	
TITLE	VTD		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS	GONZALEZ, LILLIAN S 7280 NW 8TH STREET			NAME			Onlinge		
CITY-ST-ZIP	MIAMI FL 33126			STREET ADDRESS CITY-ST-ZIP					
TITLE	120		☐ Delete	TITLE					
NAME				NAME			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS					
TITLE				CITY-ST-ZIP					
NAME			☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS				STREET ADDRESS					
CITY-ST-ZIP				CITY-ST-ZIP					
TITLE NAME			☐ Delete	TITLE			☐ Change	☐ Addition	
STREET ADDRESS				NAME CTREET ADDRESS					
CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP					
TITLE		 -	☐ Delete	TITLE	-				
NAME				NAME			Change	☐ Addition	
STREET ADDRESS DITY-ST-ZIP				STREET ADDRESS					
				CITY OF 710				ľ	

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: