

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State
 02-07-2002 90027 050 ***150.00

01/25/04 AV

DOCUMENT # P97000088506

1. Entity Name

J & J APPLIANCES CORP.



Principal Place of Business

**1642 WEST 41ST ST.
 HIALEAH FL 33012**

Mailing Address

**1642 WEST 41ST ST.
 HIALEAH FL 33012**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0787178

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**URQUIOLA, IRIS H
 1642 WEST 41ST ST.
 HIALEAH FL 33012**

Name

Isabel Alvarez

Street Address (P.O. Box Number is Not Acceptable)

1642 West 41st.

City

Hialeah

FL

Zip Code

33012

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]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 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 **PD** ☒ Delete
 NAME **URQUIOLA, OMAR**
 STREET ADDRESS **1642 WEST 41ST ST.**
 CITY-ST-ZIP **HIALEAH FL 33012**

TITLE **PD** ☒ Change ☐ Addition
 NAME **Isabel Alvarez**
 STREET ADDRESS **1642 W 41st.**
 CITY-ST-ZIP **Hialeah, FL 33012**

TITLE **STD** ☒ Delete
 NAME **URQUIOLA, IRIS H**
 STREET ADDRESS **1642 WEST 41ST ST.**
 CITY-ST-ZIP **HIALEAH FL 33012**

TITLE **STD** ☒ Change ☐ Addition
 NAME **Isabel Alvarez**
 STREET ADDRESS **1642 W 41st.**
 CITY-ST-ZIP **Hialeah, FL 33012**

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/02 (305) 557-8806
 Date Daytime Phone #

CR2E034 (9/01)