FROM : TR HERRERA FIN SUCES INC FAX NO. : 9544423294

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2000 8:00 am
Secretary of State
05-13-2000 90031 004 ***150.00

DOCUMENT # P98000010605

1. Entity Name: JR FUENTES CONSULTING, INC.

Principal Place of Business: 1408 BRICKELL BAY DR. #514 MIAMI, FL 33131

Mailing Address: 1408 BRICKELL BAY DR #514 MIAMI, FL 33131

2. Principal Place of Business: 7875 SW 33RD TERR
Suite, Apt. #, etc.
City & State: MIAMI FL
Zip: 33155 Country: U.S.A.

3. Mailing Address: 7875 SW 33RD TERR
Suite, Apt. #, etc.
City & State: MIAMI FL
Zip: 33155 Country: U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0816304 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JOSE RICARDO FUENTES
1408 BRICKELL BAY DR.
#514
MIAMI, FL 33131

7. Name and Address of New Registered Agent
Name: JOSE RICARDO FUENTES
Street Address (P.O. Box Number is Not Acceptable): 7875 SW 33RD TERRACE
City: MIAMI FL Zip Code: 33155

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 X JOSE RICARDO FUENTES 4/27/00
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. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JOSE RICARDO FUENTES 1408 BRICKELL BAY DR. #514 MIAMI, FL 33131 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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 JOSE RICARDO FUENTES 4/27/00 305-262-4287
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #