

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90197 032 ***150.00

DOCUMENT # *P98000043630*

1. Entity Name

J & R International, Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

170 A NE 32 COURT

3. Mailing Address

P.O. Box 276339

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

OAKLAND PARK - FL

City & State

BOCA RATON - FL

4. FEI Number

650853536

Applied For

Not Applicable

Zip

33334

Country

USA

Zip

33427

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JOSE GILBERTO ARRUDA

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

9198A SW 5th ST

City

BOCA RATON

FL

Zip Code

33428

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

JOSE GILBERTO ARRUDA

(NOTE: Registered Agent signature required when reinstating)

DATE

04-04-03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

President

NAME *JOSE GILBERTO ARRUDA*

STREET ADDRESS *9198A SW 5th St*

CITY - ST - ZIP *BOCA RATON - FL - USA*

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE GILBERTO ARRUDA

Date

04-04-03

Daytime Phone #

(561) 394-0704

CR2E034B (12/02)