

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

03-31-2002 90339 002 ***150.00

DOCUMENT # **P98000047005**
1. Entity Name
F.J.Y. Investment Group, Inc

Principal Place of Business Mailing Address

2. Principal Place of Business **1911 MADEIRA DRIVE** 3. Mailing Address **SAME AS #2**
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **WESTON, FLORIDA** City & State
Zip **33327** Country Zip Country

4. FEI Number **65-0838996** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
FRANCISCO J. YUGUEROS
1911 madeira drive
Weston, FL 33327

7. Name and Address of New Registered Agent
Name **same as #6**
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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]* DATE **05/02/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when requesting)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Francisco J. yugueros <input type="checkbox"/> Delete 1911 madeira drive Weston, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Florencio yugueros <input type="checkbox"/> Delete 1911 madeira drive Weston, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALONSO yugueros <input type="checkbox"/> Delete 1911 madeira drive Weston, FL 33327
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]* DATE **03/11/02** (954) 914-9828
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #