

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 90227 026 ***150.00

DOCUMENT # **P98000050171**

1. Entity Name

J & A DESIGN, INC.

Principal Place of Business

3475 N COUNTRY CLUB DR. #607
AVENTURA, FL 33180

Mailing Address

3475 N COUNTRY CLUB DR. #607
AVENTURA, FL 33180

2. Principal Place of Business

3475 N COUNTRY CLUB DRIVE

Suite, Apt. #, etc.

607

3. Mailing Address

3475 N COUNTRY CLUB DRIVE

Suite, Apt. #, etc.

607

City & State

AVENTURA**FL**

City & State

AVENTURA**FL**

Zip

33180

Country

US

Zip

33180

Country

U.S.

4. FEI Number

65-0838984

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional**

Fee Required

6. Name and Address of Current Registered Agent

JAIME CAMACHO
3475 N COUNTRY CLUB DRIVE #607
AVENTURA, FL 33180

7. Name and Address of New Registered Agent

Name

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

(NOTE: Registered Agent signature required when changing)

DATE

JAIME CAMACHO**4-30-01**

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 \$180.00****After MAY 1, 2001 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
PRESIDENT	JAIME CAMACHO	3475 N. COUNTRY CLUB DRIVE #607	AVENTURA FL 33180	☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
				☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
				☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
				☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
				☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
				☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
				☐	☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
				☐	☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
				☐	☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
				☐	☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
				☐	☐

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
				☐	☐

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAIME CAMACHO**4-30-01****305 792 9197**

Date

Daytime Phone