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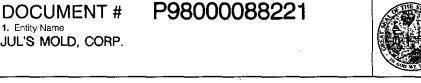
Apr 03, 2003 8:00 am Secretary of State

04-03-2003 90152 029 ***150.00

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

DOCUMENT #

JUL'S MOLD, CORP.



Principal Place of Business 2093 WEST 76TH STREET HIALEAH FL 33016		Mailing Address 2093 WEST 76TH STREET HIALEAH FL 33016				
2. Principal Place of Business		3. Mailing Address			018, 4010 HOLD HODY HIS 1904	
Suite, Apt. #. etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 65-0869716	Applied For Not Applicable	
Zip	Country	Zip	Country		\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7Name and Address of New Registered	Agent	
401/III 4D 1 01/II0			Name	Name		
AGUILAR, LOUIS 2093 WEST 76TH STREET			Street Address	(P.O. Box Number is Not Acceptable)		
HALEAH 1						
NALEAN	- C 33010		City		750-44	
			City	FL	Zip Code	
	named entity submits this statement for ions of registered agent.	r the purpose of changing its r	registered office or registe	ered agent, or both, in the State of Florida. I am t	familiar with, and accept	
the obligat	ons of registered agent.					
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	: Registered Agent signature require	ed when reinstating) DATE		
	ILE NOW!!! FEE IS \$150.00					
After May 1, 2003 Fee will be \$550.00 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	11.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11	
TITLE	PD	☐ Delete				
NAME CORECT ADODESC	AGUILAR, LOUIS	□ D¢iere	TITLE		☐ Change ☐ Addition	
OINCEL MUUNEOO: 4	OÓ 101 NIW 91 CT	□ Delete	NAME		Change Addition	
CITY-ST-ZIP	*20131 N.W. 81 CT. MIAMI FE*33015	Delete			☐ Change ☐ Addition	
7.7	MIAMI FL 33015		name Street address		☐ Change ☐ Addition ☐ Change ☐ Addition	
CITY-ST-ZIP	MIAMI FL 33015 SD AGUILAR, LIGIA M	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			
CITY-ST-ZIP TITLE NAME STREET ADDRESS	MIAMI FE 33015 SD AGUILAR, LIGIA M 20131 N.W. 81 CT.		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			
CITY-ST-ZIP d TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33015 SD AGUILAR, LIGIA M	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
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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 Block 11 if with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Y

STREET ADDRESS

CITY-ST-ZIP

PRESIDENT

Daytime Phone #