2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2001 8:00 am
Secretary of State
03-07-2001 90615 038 ***158.75

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000097190

1. Entity Name
JHART, INTERNATIONAL USA, INC.

Principal Place of Business	Mailing Address
916 LAKE DESTINY RD STE 70-E ALTAMONTE SPRINGS FL 32714	916 LAKE DESTINY RD STE 70-E ALTAMONTE SPRINGS FL 32714

2. Principal Place of Business		3. Mailing Address	
916 Lake Destiny Rd		552 STILLWATER Dr	
Suite, Apt. #, etc.: Suit 70 E		Suite, Apt. #, etc.	
City & State: ALTAMONTE SPRING,		City & State: OVIEDO FL.	
Zip: 327.14	Country: Seminole	Zip: 32765	Country: Seminole

4. FEI Number 59-3614686 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RUALES, JOAQUIN A
916 LAKE DESTINY RD
STE 70-E
ALTAMONTE SPRINGS FL 32714

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] 03/03/01
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, 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MP [illegible] RUALES, JOAQUIN A 916 LAKE DESTINY RD STE 70-E ALTAMONTE SPRINGS FL 32714	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT/MANAGER RUALES JOAQUIN A 916 LAKE DESTINY Rd Suite 70-E ALTAMONTE SPRING FL 32714	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[illegible]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice president RUALES JOAQUIN Andres (Jr) 552 STILLWATER Dr Oviedo, FL, 32765	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

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] JOAQUIN A Ruales (President) 03/03/01 - 407-365-1547
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #