

FILED
Mar 21, 2005 8:00 am
Secretary of State

02-01-2005 90041 020 ***150.00

FOR PROFIT CORPORATION -
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000015459	
1. Entity Name	
MY DESTINY BANQUET HALL INC	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1970 WEST 60TH STREET Suite, Apt. #, etc.		3. Mailing Address SAME Suite, Apt. #, etc.	
City & State HIALEAH, FL		City & State SAME	
Zip 33012	Country	Zip 33012	Country USA

4. FEI Number 65-0897886	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

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DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name JORGE JIMENEZ	
	Street Address (P.O. Box Number is Not Acceptable) 14427 SW 38 TERRACE	
	City MIAMI	Zip Code 33175

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: JORGE JIMENEZ PRESIDENT **1/21/2005**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
Trust Fund Contribution.

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

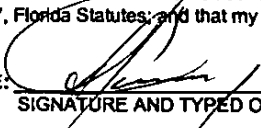
TITLE PRESIDENT	NAME JORGE J JIMENEZ
STREET ADDRESS 14427 SW 38 TERRACE	CITY-ST-ZIP MIAM FL 33175
TITLE ICE PRESIDENT	NAME MARGARITA JIMENEZ
STREET ADDRESS 14427 SW 38 TERRACE	CITY-ST-ZIP MIAMI FL 33175
TITLE NAME	STREET ADDRESS CITY-ST-ZIP
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12. I hereby 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:  JORGE J JIMENEZ PRESIDENT **1/21/2005** **305-825-3270**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #