

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

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90017 006 ***150.00

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		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State HIALEAH, FL		City & State	
Zip 33012	Country USA	Zip	Country

60004921

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0897886		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

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

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 _____

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
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11.

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JIMENEZ, JORGE 14427 SW 38TH TERRACE MIAMI FL 33175	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JIMENEZ, MARGARITA 14427 SW 38TH TERRACE 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 JIMENEZ PRESIDENT 1/10/2007 305-825-3270
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #