FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) 0207

FILED

03 JUN -9 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #
Entity Name P99000020027
J.F.E MARINE SERVICE INC.

DO NOT WRITE IN THIS SPACE

100020779971
06/11/03--01051--020 **165.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
16150 SW 20 AVE	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI FL	City & State
Zip: 33187 Country: DADE	Zip Country

4. FEI Number: 65-0901743 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: JORGE F ESPINOSA.

Street Address (P.O. Box Number is Not Acceptable): 16150 SW 20 AVE

City: MIAMI FL Zip Code: 33187

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: _____ DATE: 4/28/03
Signature, typed or printed name of registered agent and title if applicable (Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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 PRES NAME JORGE F ESPINOSA STREET ADDRESS 16150 SW 20 AVE CITY-ST-ZIP S/T. MIAMI FL 33187	TITLE NAME STREET ADDRESS CITY-ST-ZIP 100020779971 06/11/03--01051--021 **150.00
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/28/03 Date 305-251 5393 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STATE OF FLORIDA
DEPARTMENT OF STATE

JEB BUSH
Governor

Glenda E. Hood
Secretary of State

Mr. Espinosa;

Please include the statement below in your explanation of the sixty-day notice.

"I did not receive the notice that advised me of a returned check and your intent to dissolve in 60 days. Therefore I am requesting a waiver of the reinstatement fee and penalty".

Uniform Business Report

$315.00

JFE MARINE SERVICE..
DOCUMENT # P99000020027

I NEVER RECEIVED I NEVER RECEIVED YOUR LETTER REGARDING YOUR 60 DAYS TO DISSOLVE COMP. PLEASE REISSUE CORP. IN GOOD STANDING ENCLOSED IS ALSO MONEY ORDER RETURNED FOR 2003 FOR 150.00 + 165.00 FOR 2002 THANK YOU

JORGE F ESPINOSA PRESIDENT

www.sunbiz.org