

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

FILED
Aug 06, 2002 8:00 am
Secretary of State

08-06-2002 90276 007 ***150.00

120040

DOCUMENT # **D99000042171**

1. Entity Name

AVJ Ventures Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

13415 SW 111 Terr

13415 SW 111 Terr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33186

Country

USA

Zip

33186

Country

USA

DO NOT WRITE IN THIS SPACE

PLEASE CORRECT #

4. FEI Number

650918913

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Arthur V. Rodriguez

Street Address (P.O. Box Number is Not Acceptable)

13415 SW 111 Terr

City

MIAMI

FL

Zip Code

33186

**DO NOT WRITE
IN THIS SPACE**

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

x Arthur V. Rodriguez CEO

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/30/02

DATE

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 NAME STREET ADDRESS CITY-ST-ZIP	PO RODRIGUEZ, ARTHUR V 13415 SW 111 Terr MIAMI FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DURAL, PETER B 19762 SW 124 Ave MIAMI, FL 33177 PLEASE Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GORGE LUIS PADRON 2910 SW 105 St MIAMI, FL 33165 PLEASE Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 live empowered.

SIGNATURE: **x**

Arthur V. Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/30/02

DATE

305-282-7700

Daytime Phone #

CR2E034B (12/01)

Attachment

July 30, 2002

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: P99000042171

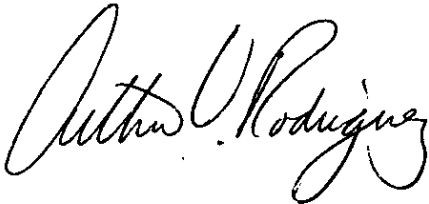
Gentlemen:

123345

In reference to the above mentioned corporation enclosed please find the renewal application due to the fact I never received the renewal report furnished by your office.

I am enclosing 150.00 in order to renew my corporation.

Thank you,



Arthur Rodriguez
President