

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000053491

1. Entity Name

J & J PERFORMANCE ASSOCIATES II, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90004 005 ***150.00

Principal Place of Business

1160 NE 134TH STREET
NO. MIAMI FL 33161

Mailing Address

1160 NE 134TH STREET
NO. MIAMI FL 33161-4253

2. Principal Place of Business

990 N. Homestead Blvd. 16500 NW 2nd Avenue

3. Mailing Address

16500 NW 2nd Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Homestead FL

City & State
Miami FL

4. FID Number
650945623

Applied For
Not Applicable

Zip 33030 Country USA

Zip 33169 Country USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WASERSTEIN, RICHARD ESQ
913 NORMANDY DRIVE
MIAMI BEACH FL 33141

Name TED L. RAVELO
Street Address (P.O. Box Number is Not Acceptable)
16500 NW 2nd Avenue
City Miami FL Zip 33169

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-5-99

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, 2000 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	PD	<input type="checkbox"/> Delete
NAME	RAVELO, TED L	
STREET ADDRESS	1160 NE 134TH STREET	
CITY-ST-ZIP	NO. MIAMI FL 33161	
TITLE	STD	<input type="checkbox"/> Delete
NAME	RAVELO, MARIA TERESA P	
STREET ADDRESS	1160 NE 134TH STREET	
CITY-ST-ZIP	NO. MIAMI FL 33161	
TITLE	D	<input type="checkbox"/> Delete
NAME	PANGANIBAN, LEONARD	
STREET ADDRESS	1160 NE 134TH STREET	
CITY-ST-ZIP	NO. MIAMI FL 33161	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)