2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P99000071322 1. Entity Name J & N SEWING MACHINE, INC. 05-02-2000 90117 006 ***150.00 Mailing Address

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

TITLE

NAME

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NAME STREET ADDRESS

TITLE NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Name

511 S.W.88TH PLACE WEST

SAME

MIAMI FL 33174-2482

3. Mailing Address

City & State

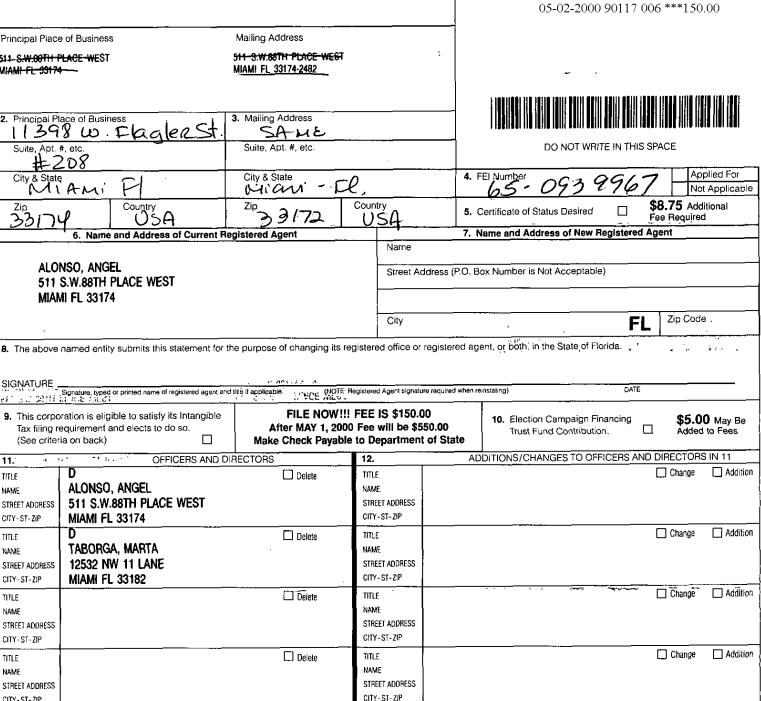
6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

Suite, Apt. #, etc.

May 02, 2000 8:00 am Secretary of State



NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IE 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 eath; 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 in of the corporation or the receiver or trustee empowered to exec changed, or on an attachment with an address, with all other if 13 C. 3

SIGNATURE:

Principal Place of Business

511-S.W.00TH PLACE-WEST MIAMI FL 33174

2. Principal Place of Business

Suite, Apt. #, etc.

11398 W. Flaa

ALONSO, ANGEL

MIAMI FL 33174

(See criteria on back)

D

n

SIGNATURE

11.

TITLE

MAME

TITLE

NAME

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STREET ADDRESS

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

511 S.W.88TH PLACE WEST

9. This corporation is eligible to satisfy its Intangible

ALONSO, ANGEL

MIAMI FL 33174

TABORGA, MARTA

MIAMI FL 33182

12532 NW 11 LANE

511 S.W.88TH PLACE WEST

Tax filing requirement and elects to do so.

D NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OF

☐ Change

☐ Change

☐ Addition

☐ Addition