

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000091070

1. Entity Name

JMART & SOSA INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90074 013 ***150.00

Principal Place of Business

8355 SW 78 STREET
MIAMI FL 33143

Mailing Address

8355 SW 78 STREET
MIAMI FL 33143-3833

2. Principal Place of Business

16772 N. Kendall Dr.

3. Mailing Address

13200 SW 128th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite # F-2

City & State

Miami, FL 33196

City & State

Miami, FL

Zip

33196

Country

Zip

33186

Country

4. FEI Number

65-0955411

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EMANUEL, JAY
13200 SW 128TH STREET SUITE F2
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE ☐ Delete
NAME PD
STREET ADDRESS MARTINEZ, JOHNNY
CITY-ST-ZIP 8355 SW 78 STREET
MIAMI FL 33143

TITLE ☐ Delete
NAME VP/D
STREET ADDRESS JAY EMANUEL
CITY-ST-ZIP 13200 SW 128th St. # F-2
Miami, FL 33186

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME VP/D
STREET ADDRESS JAY EMANUEL
CITY-ST-ZIP 13200 SW 128th St. # F-2
Miami, FL 33186

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 #

1/19/00 (305) 255-2660

CR2E034 (9/99)