

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90189 002 ***150.00

DOCUMENT # S53770

1. Entity Name
JUST BASKETS INTERNATIONAL, INC.



Principal Place of Business
5921 SW 27 ST
MIAMI, FL 33155 US

Mailing Address
5921 SW 27 ST
MIAMI, FL 33155 US

2. Principal Place of Business
5793 COMMERCE LN

3. Mailing Address
5793 COMMERCE LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami FL

City & State
Miami FL

Zip Country
33143 USA

Zip Country
33143



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ \$3.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSENBAUM, SCOTT E.
5921 SW 27 ST
MIAMI, FL 33155

Name

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

5793 COMMERCE LN

City **Miami**

FL

Zip Code **33143**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Delete
D ROSENBAUM, SCOTT E.
STREET ADDRESS **5921 SW 27 ST**
CITY-ST-ZIP **MIAMI, FL**

TITLE NAME ☒ Change ☐ Addition
5793 COMMERCE LN
STREET ADDRESS **Miami FL 33143**
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 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

SCOTT ROSENBAUM 5-12-03

Date

Daytime Phone #

303-321-1700

CR2E034 (10/02)

attachment

90135998
#553770

May 12, 2003

To whom it may concern,
Florida Department of State
Division of Corporations

I am writing to request wavier of any penalties. I called the division of corporations and spoke with a young lady today and explained that when I was doing a search for a corporation it occurred to me that I did not remember receiving my corporate documents. I explained that I moved the business in July/August of 2002. She asked me if I notified anyone. I had notified the department of revenue, which is still showing an incorrect address after contacting them several times. I was told to down load the forms from the net and send this letter of explanation and the check attached for \$150.00

At this time I respectfully request a wavier of any penalties. Thank for your consideration. If there any questions please contact me at 305-321-1700

Sincerely,

A handwritten signature in black ink, appearing to read 'Scott Rosenbaum', with a long horizontal flourish extending to the right.

Scott Rosenbaum