

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000090248

1. Entity Name

JASAL GROUP, INC.



Principal Place of Business

1000 PONCE DE LEON
STE 120
MIAMI FL 33134

Mailing Address

PO BOX 227818
MIAMI FL 33152

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1042917**

Applied For
Not Applicable

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

VIDAL, FERNANDO
701 SW 27TH AVE STE #606
MIAMI FL 33135

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. 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 signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete

P JAVIER, ARMANDO A
7225 NW 25 ST, STE 201
MIAMI FL 33122

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete

V JAVIER, YVONNE
7225 NW 25 ST, STE 201
MIAMI FL 33122

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete

D JAVIER, ARMANDO M
7225 NW 25 ST, STE 201
MIAMI FL 33122

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete

D JAVIER, JUAN CARLOS
7225 NW 25 ST, STE 201
MIAMI FL 33122

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete

D VIDAL, FERNANDO J
1330 CORAL WAY # 305
MIAMI FL 33145

TITLE NAME STREET ADDRESS CITY- ST- ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

U00000248957
03/02/05-80050-015 150.00

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

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Armando Javier President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/05
Date

786-2343377
Daytime Phone #