

**2017 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000000193

**Entity Name:** JUCATEL LIMITED PARTNERSHIP

**Current Principal Place of Business:**

4565 PONCE DE LEON BOULEVARD  
STE 100  
CORAL GABLES, FL 33146

**Current Mailing Address:**

4565 PONCE DE LEON BOULEVARD  
STE 100  
CORAL GABLES, FL 33146 US

**FEI Number:** 56-2432631

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INTERNATIONAL CORPORATE SERVICE INC  
2600 S. DOUGLAS ROAD  
1007  
CORAL GABLES, FL 33134 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**General Partner Detail :**

Document #		Document #	
Name	MARTINEZ, JUAN PABLO	Name	MARTINEZ, ANDRES
Address	4565 PONCE DE LEON BOULEVARD STE 100	Address	4565 PONCE DE LEON BOULEVARD STE 100
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUAN PABLO MARTINEZ

**GENERAL PARTNER**

**04/03/2017**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date