

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000090248

**Entity Name:** JASAL GROUP, INC.

**Current Principal Place of Business:**

1600 PONCE DE LEON BLVD  
STE 1002  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1600 PONCE DE LEON BLVD  
STE 1002  
CORAL GABLES, FL 33134

**FEI Number:** 65-1042917

**Certificate of Status Desired:** No

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

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

**Officer/Director Detail :**

Title P  
Name JAVIER, ARMANDO A  
Address 1600 PONCE DE LEON BLVD, STE 1002  
City-State-Zip: CORAL GABLES FL 33134

Title V  
Name JAVIER, YVONNE S  
Address 1600 PONCE DE LEON BLVD, STE 1002  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name JAVIER, LIRIA I  
Address 1600 PONCE DE LEON BLVD, STE 1002  
City-State-Zip: CORAL GABLES FL 33134

*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 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ARMANDO JAVIER

P

04/18/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date