

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000126618

Entity Name: JCL VENTURES CORP.**Current Principal Place of Business:**169 E. FLAGLER STREET
PENTHOUSE
MIAMI, FL 33131**Current Mailing Address:**169 E. FLAGLER STREET
PENTHOUSE
MIAMI, FL 33131 US**FEI Number:** 66-0611095**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ATRIUM REGISTERED AGENTS, INC.
8950 SOUTHWEST 74TH COURT
SUITE 1901
MIAMI, FL 33156 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	PD
Name	LINDENFELD, DANYA
Address	169 E. FLAGLER STREET PH
City-State-Zip:	MIAMI FL 33131

Title	VD
Name	LINDENFELD, MARTIN
Address	169 E. FLAGLER STREET PH
City-State-Zip:	MIAMI FL 33131

Title	SD
Name	RESSLER, GARY
Address	169 E. FLAGLER STREET PH
City-State-Zip:	MIAMI FL 33131

Title	D
Name	RESSLER, VIVIEN
Address	169 E. FLAGLER STREET PH
City-State-Zip:	MIAMI FL 33131

Title	D
Name	LINDENFELD, ELSA
Address	169 E. FLAGLER STREET PH
City-State-Zip:	MIAMI FL 33131

Title	VP
Name	BENHAMRON, URI
Address	169 E. FLAGLER STREET PH
City-State-Zip:	MIAMI FL 33131

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: LINDENFELD , DANYA

PD

04/23/2018

Electronic Signature of Signing Officer/Director Detail_____
Date