

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003744

Entity Name: SCI J.L. GREGORI, INC.

FILED
Jun 10, 2004
Secretary of State

Current Principal Place of Business:

8350 NW 56TH ST.
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8350 NW 56TH ST.
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-1120778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELLER, LANCE
520 BRICKELL KEY DR., STE. O-305
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CS () Delete
Name: LECLERC, CHRISTOPHE
Address: 8350 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166

Title: P () Delete
Name: GREGORI, JEAN LOUIS
Address: 8350 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166

Title: VP () Delete
Name: GREGORI, XAVIER JEAN
Address: 8350 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: LECLERC, CHRISTOPHE
Address: 8350 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166

Title: P (X) Change () Addition
Name: GREGORI, JEAN L
Address: 8350 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166 US

Title: VP (X) Change () Addition
Name: GREGORI, XAVIER J
Address: 8350 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CHRISTOPHE LECLERC

DS

06/10/2004

Electronic Signature of Signing Officer or Director

Date