

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90252 005 \*\*\*158.75

**DOCUMENT # H04762**

1. Entity Name  
**JONES YACHT & SHIP BROKERS, INC.**



Principal Place of Business  
**VICTOR BARED**  
3399 N.W. SOUTH RIVER DRIVE  
MIAMI, FL 33142 US

Mailing Address  
**VICTOR BARED**  
3399 N.W. SOUTH RIVER DRIVE  
MIAMI, FL 33142 US

**50018793**



2. Principal Place of Business  
**3399 NW South River Dr.**

3. Mailing Address  
**SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04282006 Chg-P CR2E034 (11/05)

City & State  
**Miami, Florida**

City & State

4. FEI Number  
**59-0832181**

Applied For  
Not Applicable

Zip  
**33142**

Country  
**US**

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**BARED, JOSE**  
3399 N.W. SOUTH RIVER DRIVE  
MIAMI, FL 33142

## 7. Name and Address of New Registered Agent

Name **Jun Diaz, Esquire**

Street Address (P.O. Box Number is Not Acceptable)

**5800 Northwood 74th Ave**

City **Miami**

**FL**

Zip Code  
**33166**

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 re-registering)

DATE

**Jun Diaz, Esq**

**April 29, 2006**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **BARED, VICTOR**  
STREET ADDRESS **3399 N.W. S. RIVER DR.**  
CITY-ST-ZIP **MIAMI, FL 33142**

TITLE **VP** ☐ Delete  
NAME **BARED, JOSE**  
STREET ADDRESS **3399 NW SO. RIVER DRIVE**  
CITY-ST-ZIP **MIAMI, FL 33142**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☒ Addition  
NAME **Secy/Tr**  
STREET ADDRESS **Elias Rodriguez**  
CITY-ST-ZIP **3399 NW South River Drive**  
**Miami, FL 33166**

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Jun Diaz, Esq**

Date

Daytime Phone #

**April 29, 2006**