2007 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Apr 23, 2007 08:00 A Secretary of State		
DOCUMENT # H66773 1. Entity Name JEP FAMILY ENTERPRISES, INC.				Se	ecretary of State	
Principal Plac 7152 N.W. 5 MIAMI, FL 3	OTH STREET	Mailing Address 7152 N.W. 50TH STREET MIAMI, FL 33166				
D	O NOT WRITE	IN THIS SPA	CE	4. FEI Number 59-2605033	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PLANAS, JUAN E. 7152 NW 50 STREET MIAMI, FL 33166			DO NOT WRITE IN THIS SPACE			
Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent and tride if applicable Control of the provided agent agent and tride if applicable Control of the provided agent agent and tride if applicable Control of the provided agent agent and tride if applicable Control of the provided agent agent and tride if applicable Control of the provided agent						
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution I					045-016 150.00	
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-DIA	OFFICERS AND D PSD PLANAS, JUAN 7152 N.W. 50TH STREET MIAMI, FL	IRECTORS	-			
CITY-ST-ZIP JITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP			_			
TITLE NAME STREET ADDRESS CITY - ST - ZIP				•••		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this report or supplemental report is true and accurate and that my signature sha of the corporation or the receiver or trusted empoying of to execute this report as required by C changed, or on an attachment with an average sympastic to the empowered.				same legal effect as if made under oain 7. Florida Statutes; and that my name ap	t; that I am an oncer or director	
SIGNATURE:					305-592-3136 Daytime Phone	
Juan Planas, P.						