2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # K53425

1. Entity Name
J.J.G. PROPERTY, INC.

Principal Place of Business	Mailing Address
7281 N.W. 8TH ST. MIAMI, FL 33126	8100 SW 60TH AVENUE MIAMI, FL 33143

DO NOT WRITE IN THIS SPACE

y4030030

02022004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0096178	Not Applicable

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

6. Name and Address of Current Registered Agent

FERNANDEZ, JULIAN, JR.
8100 SW 60TH AVENUE
MIAMI, FL 33143

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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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FERNANDEZ, JULIAN JR.
STREET ADDRESS	8100 SW 60TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33143

TITLE	VD
NAME	LAGE, JUSTINA
STREET ADDRESS	5746 S.W. 4TH STREET
CITY-ST-ZIP	MIAMI, FL

TITLE	ST
NAME	ESPALLARGAS, GLADYS
STREET ADDRESS	6423 COLLINS AVNEUE APT 1705
CITY-ST-ZIP	MIAMI, FL 33141

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____   3/10/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #