2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Jan 30, 2007 08:00 AM DOCUMENT # K53425 1. Entity Name **Secretary of State** J.J.G. PROPERTY, INC. Principal Place of Business Mailing Address 8100 SW 60TH AVENUE MIAMI FL 33143 7281 N.W. 8TH ST. MIAMI FL 33126 2. Principal Place of Business - No P.O. Box # 3. Mailing Addross Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) Applied For City & State City & State 4. FEI Number 65-0096178 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namo FERNANDEZ, JULIAN, JR. 8100 SW 60TH AVENUE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33143** City Zip Codo 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 accopt the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. DATE (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11111 ☐ Delete IIILE ☐ Change Addition FERNANDEZ, JULIAN JR. NAME NAME U00000611802 8100 SW 60TH AVENUE STREET ADORESS 02/02/07-80077-023 150.00 STREET ADDRESS MIAMI FL 33143 CITY - ST - ZUP CITY-ST-71P ۷Ď Delete TITLE ☐ Change Addition TITLE LAGE, JUSTINA MAME NAME 7731 SW 100TH ST STREET ADDRESS STREET ADDRESS MIAMI FL 33156 CITY -ST-ZIP CITY ST ZIP ST ☐ Change Addition IIILE Delete ESPALLARGAS, GLADYS 10635 NW 54TH ST STREET ADDRESS STREET ADDRESS MIAMI FL 33178 CITY-ST-7IP CITY ST-7IP ☐ Change Addition Delete IIILE TITLE NAME MARK STREET ADDRESS STREET ADDRESS CITY - ST - ZIP City-St-7iP ☐ Change ☐ Addition 11111 ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CHTY-ST-ZIP Delete TITLE ☐ Change ☐ Addition 11111 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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.

FILED

Daytime Phone #