

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90403 009 ***150.00

DOCUMENT # P00000028392

1. Entity Name
JDS JUICES, DELIVERIES & SERVICES, INC.



Principal Place of Business
C/O RAUL J. SALAS 201 S. BISCAYNE BLVD.
1500 MIAMI CENTER
MIAMI, FL 33131

Mailing Address
C/O RAUL J. SALAS 201 S. BISCAYNE BLVD.
1500 MIAMI CENTER
MIAMI, FL 33131

40000000



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0993084

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD. 1500 MIAMI CENTER
MIAMI, FL 33131

**DO NOT WRITE
IN THIS SPACE**

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, 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	DPT
NAME	MARTI DE PRADO, JUANA R
STREET ADDRESS	529 TERMINAL AVE.
CITY-ST-ZIP	NEWCASTLE, DE 19720
TITLE	DVS
NAME	PRADO, FRANCISCO
STREET ADDRESS	529 TERMINAL AVE.
CITY-ST-ZIP	NEWCASTLE, DE 19720
TITLE	D
NAME	PARODI, CARLOS A
STREET ADDRESS	3 DE FEBRERO 1771, PISO 3
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA 1426,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: x

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mr. Francisco Prado, Secretary

Date

April 11, 2006

Daytime Phone #

(305) 358-6300