## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000077761

Entity Name: ALFA AMERICA J&C CORP.

FILED Apr 30, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

16845 SW 90 TERRACE 5600 SW 135 AVENUE MIAMI, FL 33196

100

MIAMI, FL 33183

**Current Mailing Address: New Mailing Address:** 

16845 SW 90 TERRACE 5600 SW 135 AVENUE

MIAMI, FL 33196 100 MIAMI, FL 33183

FEI Number: 65-1032600 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VASQUEZ, JUSSIE CAROL VASQUEZ, JUSSIE CAROL 16845 SW 90 TERRACE 5600 SW 135 AVENUE MIAMI, FL 33196 100

MIAMI, FL 33183

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.

SIGNATURE: JUSSIE CAROL VASQUEZ 04/30/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: (X) Change ( ) Addition VASQUEZ, JUSSIE CAROL VASQUEZ, JUSSIE CAROL Name: Name: 16845 SW 90 TERRACE 5600 SW 135 AVENUE, 100 Address: Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: MIAMI, FL 33183

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUSSIE CAROL VASQUEZ **PSD** 04/30/2004

Electronic Signature of Signing Officer or Director

Date