

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 20, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P00000081785

1. Entity Name  
JCCS INC.



Principal Place of Business

1729 SW 32 PL  
FT LAUDERDALE, FL 33315

Mailing Address

1729 SW 32 PL  
FT LAUDERDALE, FL 33315



01282005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1032781

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

CONCHA, JAVIER F  
1729 SW 32ND PL  
FT LAUDERDALE, FL 33315

**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]*  
Print or typed name of registered agent (if not a corporation, print or typed name of officer or director)

DATE

4-18-05

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$350.00**

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP  
D  
CONCHA, JAVIER F  
1729 SW 32 PL  
FT LAUDERDALE, FL 33315

U00000319398  
04/20/05-80096-022 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAVIER F. CONCHA

DATE

4-18-05

DAY/MTY PHONE #