2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000000175

Entity Name: J & C DELICIAS CORPORATION

FILED Apr 29, 2005 Secretary of State

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

1336 SABAL TRAIL 101 E ATLANTIC BLVD

WESTON, FL 33327 POMPANO BEACH, FL 33060

Current Mailing Address: New Mailing Address:

1336 SABAL TRAIL 101 E ATLANTIC BLVD

WESTON, FL 33327 POMPANO BEACH, FL 33060

FEI Number: 65-1070723 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:

DIEZ, JOSE IGNACIO

1491 SUNSET WAY

3505 DUNES VISTA DRIVE

MESTON EL 23237 LIS

DOMBANO BEACH, EL 23069 LIS

WESTON, FL 33327 US POMPANO BEACH, FL 33069 US

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: 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete Title: PD (X) Change () Addition DIEZ, JOSE IGNACIO Name: DIEZ, JOSE IGNACIO

 Address:
 1491 SUNSET WAY
 Address:
 3505 DUNES VISTA DRIVE

 City-St-Zip:
 WESTON, FL 33327
 City-St-Zip:
 POMPANO BEACH, FL 33069

Title: VD () Delete Title: VD (X) Change () Addition Name: MONTOYA, LAURA INES Name: MONTOYA, LAURA INES

Address: 1491 SUNSET WAY Address: 3505 DUNES VISTA DRIVE
City-St-Zip: WESTON, FL 33327 City-St-Zip: POMPANO BEACH, FL 33069

Title: S () Delete Title: S (X) Change () Addition

 Name:
 GIRALDO, CARLOS H
 Name:
 GIRALDO, CARLOS H

 Address:
 1336 SABAL TRAIL
 Address:
 3505 DUNES VISTA DRIVE

 City-St-Zip:
 WESTON, FL 33327
 City-St-Zip:
 POMPANO BEACH, FL 33069

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: CARLOS H. GIRALDO S 04/29/2005