

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064809

Entity Name: J C & J C MEDICAL GROUP, INC.

FILED
Jun 30, 2009
Secretary of State

Current Principal Place of Business:

330 SW 27 AVE.
301
MIAMI, FL 33135

New Principal Place of Business:

330 SW 27 AVE.
707
MIAMI, FL 33135

Current Mailing Address:

330 SW 27 AVE.
301
MIAMI, FL 33135

New Mailing Address:

330 SW 27 AVE.
707
MIAMI, FL 33135

FEI Number: 65-1118095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUAREZ, JOSE C
330 SW 27 AVE
SUITE 301
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

SUAREZ, JOSE C
330 SW 27 AVE
SUITE 707
MIAMI, FL 33135 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:

06/30/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUAREZ, JOSE C
Address: 330 SW 27TH AVE STE 301
City-St-Zip: MIAMI, FL 33135

Title: V () Delete
Name: ROS, MARIA I
Address: 6955 SUNRISE TERR.
City-St-Zip: CORAL GABLES, FL 33134

Title: ST () Delete
Name: SUAREZ, REINALDO
Address: 221 MAJORCA, #401
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SUAREZ, JOSE C
Address: 330 SW 27TH AVE STE 707
City-St-Zip: MIAMI, FL 33135

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOSE C SUAREZ

P

06/30/2009

Electronic Signature of Signing Officer or Director

Date