2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067005

City-St-Zip:

MIAMI, FL 33186

FILED Jul 04, 2009 Secretary of State

Entity Nar	me: JCD I	NVESTMENTS, INC.		
Current P	rincipal Pl	ace of Business:	New Principal Place o	f Business:
11857 SW MIAMI, FL				
Current M	lailing Add	ress:	New Mailing Address:	
11857 SW MIAMI, FL				
FEI Number:	: 03-0462432	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:
DELGADO 11857 SW MIAMI, FL		JS	DELGADO, DOMINIC 11857 SW 99 LANE MIAMI, FL 33186 US	6
The above in the State	named ent e of Florida.	ity submits this statement for the p	urpose of changing its registered	office or registered agent, or both,
SIGNATUR	RE: DOMII	NIC DELGADO		07/04/2009
	Elec	tronic Signature of Registered Age	nt	Date
		7.193(2)(b), F.S., the corporation did not cing Trust Fund Contribution ().	t receive the prior notice.	
OFFICERS	S AND DIR	ECTORS:	ADDITIONS/CHANGES	S TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	VD DELGADO, 11857 SW MIAMI, FL	99 LANE	Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address: City-St-Zip:	SD DELGADO, 11857 SW MIAMI, FL	99 LANE	Title: (Name: Address: City-St-Zip:) Change ()Addition
Title: Name: Address:	PD DELGADO, 11857 SW		Title: (Name: Address:) Change () Addition

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.

City-St-Zip:

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