Apr 29 05 12:54p ValienteHernandez PA

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May 04, 2005 8:00 am
Secretary of State
05-04-2005 90116 026 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000094773

1. Entity Name
JGC MANAGEMENT INC

Principal Place of Business
6730 MAYBOLE STREET
TEMPLE TERRACE, FL 33617

Mailing Address
6730 MAYBOLE STREET
TEMPLE TERRACE, FL 33617

DO NOT WRITE IN THIS SPACE

04292005 No Chg CR2E034 (10/03)

4. FEI Number
22-3867432

Applied For
Not Applicable

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

Name and Address of Current Registered Agent

CIACCIO, JAMES G
6730 MAYBOLE STREET
TEMPLE TERRACE, FL 33617

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______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CIACCIO, JAMES G
STREET ADDRESS	6730 MAYBOLE STREET
CITY-ST-ZIP	TEMPLE TERRACE, FL 33617
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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I hereby certify that the information supplied with this filing does not qualify 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 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 all other like empowered.

SIGNATURE: James G. Ciaccio 4-29-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #