


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 21, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000101137</b> 1. Entity Name JC & M INVESTMENT GROUP, INC.	
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Principal Place of Business 11228 NW 56ST MIAMI, FL 33178	Mailing Address 11228 NW 56ST MIAMI, FL 33178
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**DO NOT WRITE IN THIS SPACE**



01202005 No Chg-P CR2E034 (10/03)

4. FEI Number 14-1847350	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

RESTREPO, JUAN C  
10369 NW 41 ST PMB 114  
MIAMI, FL 33178

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RESTREPO, JUAN C 11228 NW 56 ST MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RESTREPO, MARTHA H 11228 NW 56 ST MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RESTREPO, VANESSA 10369 NW 41 STREET, PMB #114 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/21/05-80059-014 150.00

**DO NOT WRITE 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)(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 an address, with all other like empowered.

SIGNATURE: *Juan C. Restrepo* 02/16/05 305-416-4568  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #