

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90020 044 ***158.75

DOCUMENT # P03000015850

1. Entity Name

JC REAL ESTATE INVESTMENT, INC.



Principal Place of Business

5300 SW 72ND AVE.
MIAMI FL 33155

Mailing Address

5300 SW 72ND AVE.
MIAMI FL 33155

2. Principal Place of Business

20200 SW 248 Street

3. Mailing Address

P.O. Box 924320

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL 33031

City & State

Princeton, FL

Zip

33031

Country

Dade

Zip

33092

Country

Dade

4. FEI Number

13-4237353

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHERTA, GERRADO
5300 SW 72ND AVE.
MIAMI FL 33155

7. Name and Address of New Registered Agent

Name **CHERTA, Gerardo**

Street Address (P.O. Box Number is Not Acceptable)

20200 SW 248 Street

City

MIAMI

FL

Zip Code

33031

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	CHERTA, GERARDO	
STREET ADDRESS	5300 SW 72ND AVE.	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	VD	<input type="checkbox"/> Delete
NAME	CHERTA, LUCRECIA T	
STREET ADDRESS	5300 SW 72ND AVE.	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CHERTA, JAVIER	
STREET ADDRESS	5300 SW 72ND AVE.	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CHERTA, Gerardo	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P.O. Box 924320	
STREET ADDRESS	Princeton, FL 33092	
CITY-ST-ZIP		
TITLE	CHERTA, LUCRECIA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P.O. Box 924320	
STREET ADDRESS	Princeton, FL 33092	
CITY-ST-ZIP		
TITLE	CHERTA, JAVIER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P.O. Box 924320	
STREET ADDRESS	Princeton, FL 33092	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Lucricia Cherta
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/2006

Date

305-6354800

Daytime Phone #