

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

May 02, 2006 08:00 AM

Secretary of State

CK #1286 / 04/28/06.

BANK WASHINGTON MUTUAL

DOCUMENT # P03000036579

1. Entity Name

J.C. GLOBAL SOLUTIONS & ENTERPRISES INC.



Principal Place of Business

2443 RUNYON CIR
ORLANDO, FL 32837

Mailing Address

2443 RUNYON CIR
ORLANDO, FL 32837



04122006

No Chg-P

CR2E034 (11/05)

4. FEI Number

14-1878693

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DE LA PENA, MIGUEL
2443 RUNYON CIR
ORLANDO, FL 32837

**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 _____

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

(NOTE: Registered Agent signature required when re-registering)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10.

OFFICERS AND DIRECTORS

TITLE

PD

NAME

CORDOBA, JUANA C

STREET ADDRESS

2443 RUNYON CIR

CITY - ST - ZIP

ORLANDO, FL 32837

TITLE

VD

NAME

DELAPENA, MIGUEL

STREET ADDRESS

2443 RUNYON CIR

CITY - ST - ZIP

ORLANDO, FL 32837

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

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TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

000000558592
05/17/06-80100-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Juana Cordoba*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 04/18/06 (407) 857-273

Date

Daytime Phone #