


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90032 009 ***150.00

DOCUMENT # P03000044867
 1. Entity Name
JAI INVESTMENT, CORP.



Principal Place of Business Mailing Address
9750 SW 143 STREET **9750 SW 143 STREET**
MIAMI, FL 33176 **MIAMI, FL 33176**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
12013 SW 129 Ct. **12013 SW 129 Ct.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
#7 **#7**

City & State City & State
MIAMI, FLA. **MIAMI FLA**
 Zip Country Zip Country
33186 **US** **33186** **US**

6. Name and Address of Current Registered Agent
IBARRA, JOSE A
9750 SW 143 STREET
MIAMI, FL 33176

40033310



03102008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
13-4248356 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required.-**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD IBARRA, JOSE A 9750 SW 143 STREET MIAMI, FL 33176 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Jose Ibarra Date: 3/26/08 Daytime Phone #: 305-4986952