

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 21, 2004 8:00 am**  
**Secretary of State**

04-21-2004 90051 001 \*\*\*150.00

**DOCUMENT # P03000044935**

1. Entity Name

L.J.R.L. INVESTMENTS, INC.



Principal Place of Business

11111 BISCAYNE BLVD SUITE 418  
MIAMI FL 33181

Mailing Address

11111 BISCAYNE BLVD SUITE 418  
MIAMI FL 33181

34033130



MOORE CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

☒ Applied For  
☐ Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GLASSER, GARY S ESQ  
GARY S GLASSER PA  
19 WEST FLAGLER ST SUITE 1400  
MIAMI FL 33130

Name Alfonso A. MARTINEZ  
Street Address (P.O. Box Number is Not Acceptable)  
11401 NW 12TH ST #191  
City MIAMI FL Zip Code 33172

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 file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04-20-04

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME SALAZAR, LISBETH  
STREET ADDRESS 11111 BISCAYNE BLVD SUITE 418  
CITY-ST-ZIP MIAMI FL 33181

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME ALVAREZ, LUIS  
STREET ADDRESS 11437 NW 62ND TERRACE #230  
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Delete  
NAME GUAPURICHE, JOSEFINA  
STREET ADDRESS 11437 NW 62ND TERRACE #230  
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Delete  
NAME RODRIGUEZ, ROGELIO  
STREET ADDRESS 11437 NW 62ND TERRACE #230  
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition  
NAME ANTONIO ANDRADO  
STREET ADDRESS 11111 BISCAYNE BLVD #418  
CITY-ST-ZIP MIAMI, FL 33181

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-20-04

Date

(305) 7970411

Daytime Phone #