

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054917

Entity Name: JOCLA INVESTMENT, INC.

FILED
Feb 07, 2005
Secretary of State

Current Principal Place of Business:

780 NORTHWEST LEJEUNE ROAD
SUITE 516
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

780 NORTHWEST LEJEUNE ROAD
SUITE 516
MIAMI, FL 33126

New Mailing Address:

FEI Number: 45-0515943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIEDRA, AURELIO A CPA
780 NW 42 AVE
#516
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOSE RAMON MARTINEZ, GONZALEZ
Address: 780 NORTHWEST LEJEUNE ROAD #516
City-St-Zip: MIAMI, FL 33126

Title: VD () Delete
Name: PINEDA, MONIKA M
Address: 780 NORTHWEST LEJEUNE ROAD #516
City-St-Zip: MIAMI, FL 33126

Title: SD () Delete
Name: DE MARTINEZ, CLAUDIA
Address: 780 NORTHWEST LEJEUNE ROAD #516
City-St-Zip: MIAMI, FL 33126

Title: TD () Delete
Name: PINEDA, CLAUDIA M
Address: 780 NORTHWEST LEJEUNE ROAD #516
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: MARTINEZ, JOSE RAMON
Address: 780 NORTHWEST LEJEUNE ROAD #516
City-St-Zip: MIAMI, FL 33126

Title: VD (X) Change () Addition
Name: MARTINEZ, MONIKA
Address: 780 NORTHWEST LEJEUNE ROAD #516
City-St-Zip: MIAMI, FL 33126

Title: PD (X) Change () Addition
Name: PINEDA, CLAUDIA
Address: 780 NORTHWEST LEJEUNE ROAD #516
City-St-Zip: MIAMI, FL 33126

Title: S (X) Change () Addition
Name: MARTINEZ, CLAUDIA
Address: 780 NORTHWEST LEJEUNE ROAD #516
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLAUDIA PINEDA

PD

02/07/2005

Electronic Signature of Signing Officer or Director

Date