2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134011

Entity Name: JC SCHWARTZMAN & ASSOCIATES INC

FILED Feb 11, 2004 Secretary of State

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Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	53RD STREET ES, FL 33014	US			
Current Mailing Address:			New Maili	New Mailing Address:	
	53RD STREET ES, FL 33014	US			
FEI Number:	20-0600648	FEI Number Applied For () FE	I Number Not Appl	icable () Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SCHWARTZMAN, JUAN C 8200 NW 41 STREET 175 MIAMI, FL 33166 US					
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:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P,D ()E SCHWARTZMAN 8200 NW 41 STF MIAMI, FL 33166	REET, SUITE 175	Title: Name: Address: City-St-Zip:	P,D (X) Change () Addition SCHWARTZMAN, JUAN C 6175 NW 153 STREET, SUITE 100 MIAMI LAKES, FL 33014 US	
Title: Name: Address: City-St-Zip:	VP (X) I PAEZ, ELIAS A 3173 W 73 PLAC HIALEAH, FL 33		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S,T (X) I CHIN, MAILYN 20101 SKOKIE D MIAMI, FL 33015		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X) I ARISTIZABAL, SA 20101 SKOKIE D MIAMI, FL 33015	DR .	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (X) I MACKEN, MAIRA 20101 SKOKIE D MIAMI, FL 33015	DR .	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JUAN C SCHWARTZMAN PD 02/11/2004