

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010371

FILED
May 05, 2009
Secretary of State

Entity Name: JADE ASSOCIATES MIAMI, INC.

Current Principal Place of Business:

100 NORTH BISCAYNE BOULEVARD
SUITE 500
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

100 NORTH BISCAYNE BOULEVARD
SUITE 500
MIAMI, FL 33132

New Mailing Address:

FEI Number: 20-0606918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUREAU, OLIVIER
100 NORTH BISCAYNE BLVD
SUITE 500
MIAMI, FL 33132 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JAEGLE, EMMANUEL
Address: 242 EAST 25TH STREET - APT.4E
City-St-Zip: NEW YORK, NY 10010

Title: D () Delete
Name: SUREAU, OLIVIER
Address: 100 N. BISCAYNE BLVD - SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: D () Delete
Name: FARBOS, MONTAINE
Address: 140 WEST 71ST STREET - APT.4A
City-St-Zip: NEW YORK, NY 10023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: OLIVIER SUREAU

D

05/05/2009

Electronic Signature of Signing Officer or Director

Date