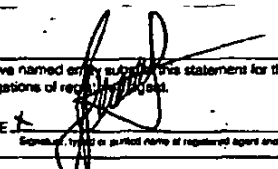
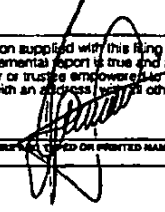


FILED
Jun 30, 2005 8:00 am
Secretary of State

04-29-2005 90283 003 ***150.00

2005 FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000027417		
1. Entity Name JED PROPERTIES & INVESTMENTS, INC.		
Principal Place of Business 9350 S DIXIE HWY STE 1500 MIAMI, FL 33156		Mailing Address 9350 S DIXIE HWY STE 1500 MIAMI, FL 33156
2. Principal Place of Business 2201 W FLAGLER ST Suite, Apt. #, etc.		3. Mailing Address 2201 W FLAGLER ST Suite, Apt. #, etc.
City & State MIAMI FL		City & State MIAMI FL
Zip 33135		Country USA
4. FEI Number 20-1811381		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent SEGREGO, FRANK J 9350 S DIXIE HWY STE 1500 MIAMI, FL 33156		7. Name and Address of New Registered Agent Name JORGE A. PEREZ Street Address (P.O. Box Number is Not Acceptable) 2201 W. FLAGLER ST City MIAMI FL Zip Code 33135
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  (NOTE: Registered Agent signature required when renewing) DATE		
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D PEREZ, JORGE A 989 NW 128TH CT MIAMI, FL 33156 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D PAEZ, EDREI 989 NW 128TH CT MIAMI, FL 33156 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP ☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 history or other like empowered.		
SIGNATURE:  (NOTE: Registered Agent signature required when renewing) DATE		