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	Mailing Address
9350 S DIXIE HWY STE 1500 MIAMI, FL 33156	9350 S DIXIE HWY STE 1500 MIAMI, FL 33156

66024020

04272005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
2201 W Flagler ST	2201 W Flagler ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami FL	City & State: Miami FL
Zip: 33135 Country: USA	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
SEGREDO, 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: ______________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEREZ, JORGE A 969 NW 128TH CT MIAMI, FL 33156 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAEZ, EDREI 969 NW 128TH CT MIAMI, FL 33156 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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 Date Daytime Phone #