## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P04000102815



FILED Apr 05, 2005 8:00 am Secretary of State

1. Entity Name J.C. F.C. CORPORATION							04-05-2005 90049 019 ***150.00				
Principal Place of Business 701 PALM AVENUE HIALEAH, FL 33010			Mailing Address 701 PALM AVENUE HIALEAH, FL 33010								
2. Principal Place of Business 3			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03282005	Chg-P	CR2E	034 (10/03)		
City & State			City & State		4. FEI Number 20	5-13801	64	<u> </u>	plied For t Applicable		
Zip	Country		Zip Coun		try		of Status Desired		\$8.75 Add		
6. Name and Address of Current Registered Agent					Name	7. Name and	Address of New F	Registered	Agent		
TEJADA, FERNANDO 701 PALM AVENUE HIALEAH, FL 33010					Street Address (P.O. Box Number is Not Acceptable)						
• .	# (s		•		City			FI	Zip Code	ė	
The above named entity submits this statement for the oursees of changing its constraint.					ed office or regis	etered agent, or bot	the in the State of El		- 1	and accent	
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.											
Dioversion 200											
SIGNATURE Signature, hyped or privised interne of registered agent and talle if applicable. (NOTE: Registered Agent augusture required when repracting)  DATE											
		48	9 Floring Comes	ing Dage	ucina d	te 00					
FILE NOWIII FEE IS \$150.00  After May 1, 2005 Fee will be \$350.00  9. Election Campaign Financ  Trust Fund Contribution.						\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIRECTORS 11					ADDITIONS/	CHANGES TO OF	FICERS AN	D DIRECTORS	S IN 11	
TITLE NAME	P/D/ GARCIA, JOSE !	•	Oelete TITLE						Change	Addition	
STREET ADDRESS	2462 NW 31 ST.				ET ADORESS						
CITY-ST-ZIP	MIAMI, FL 3314				-ST-ZIP						
TITLE	VP/D	☐ Delete	TITLE		•			Change	Addition		
NAME	TEJADA, FERNA		•	NAM	- 1						
STREET ADDRESS CITY-ST-ZIP	2462 NW 31 ST.			ET ADDRESS							
	MIAMI, FL 3314	<u> </u>			-ST-ZIP				F**4 -		
TITLE NAME			☐ Delete	TITLE NAM	- 1				Change	Addition	
STREET ADDRESS					ET ADDRESS						
CITY-ST-ZIP					-ST-ZIP						
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NAME				NAM							
STREET ADDRESS CITY+ST-ZIP					ET ADORESS -ST-ZIP						
TITLE	<del></del>		☐ Delete	TITU					Channe	[T] Addition	
NAME		•	LI Dereie	NAM	i				☐ Change	Addition Addition	
STREET ADDRESS	22				ET ADDRESS						
CITY-ST-ZIP				CITY	-ST-ZIP				=		
TITLE			☐ Delete	TATLE	1				☐ Change	☐ Addition	
NAME STREET ADDRESS				NAM	E Et address						
CITY-ST-ZIP					-ST-ZIP						
40 15	certify that the inform	ation supplied with thi	s filing does not qualify fo			Section 119.07(3V	i) Florida Statutos	I further co	while that the in	formation	

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 trystee/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: 4

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #