

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000126618

Entity Name: JCL VENTURES CORP.

FILED
Feb 24, 2012
Secretary of State

Current Principal Place of Business:

169 E. FLAGLER STREET
SUITE 1600
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

169 E. FLAGLER STREET
SUITE 1600
MIAMI, FL 33131

New Mailing Address:

FEI Number: 66-0611095 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES, FL 33146 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

OFFICERS AND DIRECTORS:

Title: PD
Name: LINDENFELD, DANYA
Address: 169 E. FLAGLER STREET #1600
City-St-Zip: MIAMI, FL 33131

Title: VD
Name: LINDENFELD, MARTIN
Address: 169 E. FLAGLER STREET #1600
City-St-Zip: MIAMI, FL 33131

Title: SD
Name: RESSLER, GARY
Address: 169 E. FLAGLER STREET #1600
City-St-Zip: MIAMI, FL 33131

Title: D
Name: RESSLER, VIVIEN
Address: 169 E. FLAGLER STREET #1600
City-St-Zip: MIAMI, FL 33131

Title: D
Name: LINDENFELD, ELSA
Address: 169 E. FLAGLER STREET #1600
City-St-Zip: MIAMI, FL 33131

Title: VP
Name: BENHAMRON, URI
Address: 169 E. FLAGLER STREET #1600
City-St-Zip: MIAMI, FL 33131

I hereby 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 all other like empowered.

SIGNATURE: DANYA LINDENFELD

PD

02/24/2012

Electronic Signature of Signing Officer or Director

_____ Date