


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90014 048 ***150.00

DOCUMENT # P04000146147					
1. Entity Name JEG REALTY CORPORATION					
Principal Place of Business 353 CAMPANA AVE CORAL GABLES, FL 33156-4217			Mailing Address 353 CAMPANA AVE CORAL GABLES, FL 33156-4217		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1787697	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MELLA, MARY JEAN C 353 CAMPANA AVE CORAL GABLES, FL 33156-4217			Name Street Address (P.O. Box Number is Not Acceptable) 1450 Madruga Avenue, Suite 306 City Coral Gables FL Zip Code 33146		
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 reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS MELLA, MARY JEAN C 353 CAMPANA AVE CORAL GABLES, FL 331564217		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Mary Jean C. Mella</u> _____ Mary Jean C. Mella			3-12-08 305-661-5530 Date Daytime Phone		

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02152008 Chg-P CR2E034 (12/06)

4. FEI Number
20-1787697

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 1450 Madruga Avenue, Suite 306
 City Coral Gables FL Zip Code 33146

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SIGNATURE: Mary Jean C. Mella

 Mary Jean C. Mella

3-12-08 **305-661-5530**
 Date Daytime Phone