2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2008 8:00 am Secretary of State

DOCUMENT # P05000111514 1. Entity Name JCR SERVICES CORP				3	04-14-2008	3 90071 031 ***15	0.00	
Principal Place	e of Business	Mailing Address		-				
8725 NW 117 ST		8725 NW 117 ST						
B11		B11						
MIAMI GARDE	ENS, FL 33018	MIAMI GARDENS, FL 330	18		II. SIIII ISIII EIIII III	DI ((88) 3800) ((80) 6180 4181) 680		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suile, Apt. #. etc.		04012008	Chg-P	CR2E034 (12/06)		
City & State		City & State		4. FEI Number 20-32879	902		plied For Applicable	
Žip	Country	Zip	Country	5. Certificate of		\$8.75 Add		
	6. Name and Address of Current F	Pagistaged Agent		7 Name and A	ddress of New R	Fee Required	1 	
	6. Name and Address of Current P	Name	7. Haine and A	uu1633 OI 11640 II	togistered Agont			
HERNANDEZ, JUAN C								
8725 NW 117 ST STE B11			Street Address	Street Address (P.O. Box Number is Not Acceptable)				
MIAMI GARDENS, FL 33018								
_			City			FL Zip Code		
O The share	and and the second seco			and a sect of both	in the Ctore of El		and accord	
	named entity submits this statement for ions of registered agent.	the purpose of changing its re-	gistered office or regist	tered agent, or both,	In the State of Fi	origa, i arri larrillar with,	and accept	
CICALATURE								
SIGNATURE_	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: R	egistered Agent signature requi	red when reinstating)	<u> </u>	DATE	<u> </u>	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaign Trust Fund Contrib		5.00 May Be dded to Fees				
10.	OFFICERS AND (DIRECTORS	11.	ADDITIONS/C	HANGES TO OFF	FICERS AND DIRECTORS	S IN 11	
TITLE	Р	☐ Delete	TITLE			☐ Change	Addition	
NAME	HERNANDEZ, JUAN C		NAME					
STREET ADDRESS	8725 NW 117 ST #B11		STREET ADDRESS					
CHY-S1-ZIP	MIAMI GARDENS, FL 33018		CITY+S1+ZIP			C Chasse	Addition	
TITLE NAME	VP BECERRA, JOSE I	Delete	TITLE NAME			Change		
STREET ADDRESS	8725 NW 117 ST #B11	l	STREET ADDRESS					
CITY-ST-ZIP	MIAMI GARDENS, FL 33018		CITY-S1-ZIP					
HILE		☐ Delete	THE			☐ Change	Addition	
NAME			NAME.					
STREET ADDRESS			STREET ADDRESS					
CITY-S1-ZIP			CUV CT 7ID					
THE			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 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:(

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #