

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000116369

Entity Name: JTC ENGINEERING, INC.

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

1920 LAKESHORE DRIVE
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1920 LAKESHORE DRIVE
WESTON, FL 33326

New Mailing Address:

8930 W STATE RD. 84 # 289
DAVIE, FL 33324

FEI Number: 20-3465204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FTAA CONSULTING, INC
8930 STATE RD. 84
289
DAVIE, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: TRIANA-SOTO, JORGE
Address: 1920 LAKESHORE DR
City-St-Zip: WESTON, FL 33326

Title: SECR () Delete
Name: TRIANA-SOTO, MIGUEL
Address: 1920 LAKESHORE DR.
City-St-Zip: WESTON, FL 33326

Title: SECR () Delete
Name: FORSTER, KATRIN D
Address: 8930 W STATE RD.84 # 289
City-St-Zip: DAVIE, FL 33324

Title: SECR () Delete
Name: CASTILLO, RAFAEL G
Address: 1920 LAKESHORE DRIVE
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KATRIN D FORSTER

SECR

04/23/2008

Electronic Signature of Signing Officer or Director

Date