2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2008
Secretary of State

DOCUMENT# P05000135935

Entity Name: JAPECA PROPERTIES, INC..

Current Principal Place of Business:

P. O. BOX 372314
SATELLITE BEACH, FL 32937

New Principal Place of Business:

250 WATERSIDE DR
INDIAN HARBOUR BEACH, FL 32937

Current Mailing Address:

P.O. BOX 372314
SATELLITE BEACH, FL 32937

New Mailing Address:

250 WATERSIDE DR
INDIAN HARBOUR BEACH, FL 32937

FEI Number: 04-3828746 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IRIZARRY, JAIME E
250 WATERSIDE DR
INDIAN HARBOUR BEACH, FL 32937 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: PD ( ) Delete
Name: IRIZARRY, JAIME E
Address: 250 WATERSIDE DR
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: STD ( ) Delete
Name: IRIZARRY BULLS, JAIME E
Address: 2965 PINE BRANCH DR
City-St-Zip: MELBOURNE, FL 32940

Title: SVD ( ) Delete
Name: IRIZARRY, PEDRO A
Address: 2000 SUNSET TERRACE DR
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SEC (X) Change ( ) Addition
Name: IRIZARRY BULLS, JAIME E
Address: 2965 PINE BRANCH DR
City-St-Zip: MELBOURNE, FL 32940

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: JAIME E. IRIZARRY PD 04/08/2008

Electronic Signature of Signing Officer or Director Date