## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000153704

Entity Name: JEFERPEÑA INVESTMENTS INC.

FILED Apr 19, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
4838 ESEC	DRA COURT			
APT 202	DTU EL 22467			
LAKE WOR	RTH, FL 33467			
Current Mailing Address:			New Mailing Addres	s:
APT 202	DRA COURT RTH, FL 33467			
	20-3825622	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
M		.,	,	.,
Name and	Address of Ci	ırrent Registered Agent:	Name and Address of	of New Registered Agent:
APT 202	DRA COURT RTH, FL 33467	US		
	named entity so of Florida.	ubmits this statement for the	purpose of changing its registere	d office or registered agent, or both,
SIGNATUF	RE:			
	Electronic	c Signature of Registered Ag	ent	 Date
Election Can		Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR:	
Title:	P ()I	Delete	Title:	( ) Change ( ) Addition
Name:	PEÑA, FERNANI		Name:	( )3- ( )
Address:	4838 ESEDRA C	OURT, APT 202	Address:	
City-St-Zip:	LAKE WORTH, F	L 33467	City-St-Zip:	
Title:	VP ()I	Delete	Title:	( ) Change ( ) Addition
Name:	PEÑA, JULIO É		Name:	( )
Address:	4838 ESEDRA C	OURT, APT 202	Address:	
City-St-Zip:	LAKE WORTH, F	*	City-St-Zip:	
Title <sup>.</sup>	T ()I	Delete	Title <sup>.</sup>	( ) Change ( ) Addition
		Delete PEÑA. SARITA	Title: Name:	( ) Change ( ) Addition
Title: Name: Address:	GUERRERO DÉ	PEÑA, SARITA	Name:	( ) Change ( ) Addition
	` '	PEÑA, SARITA OURT, APT 202		( ) Change ( ) Addition
Name: Address: City-St-Zip:	GUERRERO DE 4838 ESEDRA C LAKE WORTH, F	PEÑA, SARITA OURT, APT 202 EL 33467	Name: Address: City-St-Zip:	
Name: Address: City-St-Zip: Title:	GUERRERO DE 4838 ESEDRA C LAKE WORTH, F S () I	PEÑA, SARITA OURT, APT 202 EL 33467 Delete	Name: Address: City-St-Zip: Title:	( ) Change ( ) Addition ( ) Change ( ) Addition
Name: Address: City-St-Zip:	GUERRERO DE 4838 ESEDRA C LAKE WORTH, F	PEÑA, SARITA OURT, APT 202 EL 33467 Delete EÑA, LUZ A	Name: Address: City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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: FERNANDO PEÑA P 04/19/2006