

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90343 040 ***150.00

DOCUMENT # P05000156661					
1. Entity Name JC DREAM HOMES, INC.					
Principal Place of Business 8051 NW 36TH STREET STE 620 DORAL, FL 33166			Mailing Address 8051 NW 36TH STREET STE 620 DORAL, FL 33166		
2. Principal Place of Business 9737 NW 41ST SUITE 204		3. Mailing Address 9737 NW 41ST			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 204			
City & State Miami, FL		City & State Miami, FL		4. FEI Number 20-3894173	
Zip 33178		Country USA		Applied For Not Applicable	
Zip 33178		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent REYES, JOHANA 4069 CARAMBOLA CIRCLE N COCONUT CREEK, FL			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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: <i>Jhana Reyes</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		DATE	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO CARUCI, JOSE R 1524 CURAMENG COVE AUSTIN, TX 78748	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARUCI, JOSE R 1524 CURAMENG COVE AUSTIN, TX 78748	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CARUCI, NELLY V 1524 CURAMENG COVE AUSTIN, TX 78748	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARUCI, GABRIEL J 1524 CURAMENG COVE AUSTIN, TX 78748	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD REYES, JOHANA 4069 CARAMBOLA CIRCLE N COCONUT CREEK, FL 33066	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: <i>Jhana Reyes</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date				Daytime Phone #	