

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2007 8:00 am
Secretary of State

01-08-2007 90239 008 ***150.00

DOCUMENT # P06000031045

1. Entity Name
JUANCHISIS INVESTMENTS INC.



Principal Place of Business

8790 SW 72ND ST
MIAMI, FL 33173

Mailing Address

8790 SW 72ND ST
MIAMI, FL 33173

00000000



2. Principal Place of Business - No P.O. Box #

24483 SW 110 Place

3. Mailing Address

24483 SW 110 Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052007

Chg-P

CR2E034 (12/06)

City & State

Homestead

City & State

Homestead

4. FEI Number

20-4430746

Applied For

Not Applicable

Zip

FI

Country

33032

Zip

FL

Country

33032

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEAL, ISIS CARINA
8790 SW 72ND ST
MIAMI, FL 33173

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

24483 SW 110 Place

City

Homestead

FL

Zip Code

33032

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME LEAL, ISIS CARINA
STREET ADDRESS 8790 SW 72ND ST
CITY-ST-ZIP MIAMI, FL 33173

TITLE VPD ☐ Delete
NAME LEAL, JUAN CARLOS
STREET ADDRESS 8790 SW 72ND ST
CITY-ST-ZIP MIAMI, FL 33173

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME LEAL, ISIS CARINA
STREET ADDRESS 24483 SW 110 Place
CITY-ST-ZIP Homestead FL 33032

TITLE VPD ☒ Change ☐ Addition
NAME LEAL, JUAN CARLOS
STREET ADDRESS 24483 SW 110 Place
CITY-ST-ZIP Homestead FL 33032

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: x

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/05/2007

Date

Daytime Phone #