2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2008 08:00 Al Secretary of State

Zip Country Zip Country Sign Stress and Address of Current Registered Agent 7, Name and Address of New Registered Agent 7, Name and Address of New Registered Agent 7, Name and Address of New Registered Agent 8243 NW 188 TERRACE MIAMI, FL 33015 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accelerate the obligations of registered agent. Signal Agent	DOCUMENT # P07000096112 1. Entity Name JC & SON'S GAS MARKET INC				Secretary of St	
S700 BISCAYNE BLVD MIRANI, FL 33138 S700 BISCAYNE BLVD S700 BI	Principal Plac	ce of Business	Mailing Address		 	
Suito, Apt. #, etc. Suito, Apt. #, etc. O4022008 Chg.P CR2E034 (12/06)	8700 BISCAYNE BLVD		8700 BISCAYNE BLV	VD.		
Suito, Apt. #, etc. Suito, Apt. #, etc. O4022008 Chg.P CR2E034 (12/06)	2. Principal f	Place of Business - No P.O. Box #	3. Mailing Address			
City & State Ci					1 10 21 11 22 11 22 12 1	
Zip Country Zip Country S. Certificate of Status Desired Status Desired Status Desired Status Desired Country S. Certificate of Status Desired Status Desire			Suite, Apt. #, etc.		04022008 Chg-P CR2E034 (12/06)	
Country Zip Country Zip Country S. Cerificate of Status Desired X \$8.75 Additional Foo Requived X \$8.75 Additional Foo	City & State		City & State		4. FEI Number 26-0802037 Applied For Not Applicable	
ASOUTE NAME VASQUEZ, LUZ N 8243 NW 188 TERRACE MIAMI, FL 33015 City City FL Zip Coce City FL Zip	Zip	Country	Zıp	Country	5 Certificate of Status Desired \$8.75 Additional	
Sireet Address (P.O. Box Number is Not Acceptable)		6. Name and Address of Current	Registered Agent		<u> </u>	
Sireet Address (P.O. Box Number is No: Acceptable) City FL Zip Coce 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 accelerate obligations of registered agent. Signature FILE Now!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution: 10. OFFICERS AND DIRECTORS Trust Fund Contribution: 10. OFFICERS AND DIRECTORS Trust Fund Contribution: TRIE VASQUEZ, LUZ N	VASQUEZ	Z. LUZ N		Name		
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with and accelling obligations of registered agent. SiGNATURE Signature, typed or protect name of registered agent and see if applicable. (NOTE Projected Agent agreeting required when remotioning) FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund, Contribution. \$5.00 May Be Added to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. TITLE PARTICIPATION OFFICERS AND DIRECTORS IN 11. TITLE VASQUEZ, LUZ N 8243 NW 188 TERRACE MIAMI, FL 33015 OITY-SI-2P ITTLE SIRRET ADDRESS CITY-SI-2P Delete TITLE NAME SIRRET ADDRESS CITY-SI-2P Delete TITLE NAME SIRRET ADDRESS CITY-SI-2P Delete TITLE NAME SIRRET ADDRESS CITY-SI-2P	8243 NW 188 TERRACE			Street Address	(P.O. Box Number is Not Acceptable)	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accertate obligations of registered agent. SIGNATURE Signature, yield or private name of registred agent and set // applicable. (NOTE Registered Agent segment required when remaiting) After May 1, 2008 Fee will be \$550.00 9. Election Campaging Financing Trust Fund Contribution. \$5.00 May Be Added to Fees \$5.00 May				City	FL Zip Coce	
Spraiure : Typed or promet name of registered Agent and last 4 highlighted in the part of Agent agreeted Agent agreeted Agent agreeted when renstangly 100000311587 100000311587 10000000311587 10000000311587 10000000311587 10000000311587 10000000311587 10000000311587 10000000311587 10000000311587 10000000311587 10000000311587 100000000311587 100000000311587 1000000000311587 1000000000311587 100000000000311587 100000000000000000000000000000000000			or the purpose of changing	its registered office or registe	ered agent, or both, in the State of Florida. I am familiar with, and accept	
### After May 1, 2008 Fee will be \$55.0.0 Trust Fund Contribution	SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (No	OTE: Registered Agent algosture require	ed when renstaring) DATE	
THE NAME NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP						
NAME SIRE: I ADDRESS CITY-SI-ZIP TITLE NAME SIRE: ADDRESS CITY-SI-ZIP	10.		DIRECTORS	11.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS	VASQUEZ, LUZ N 8243 NW 188 TERRACE	☐ Dele:e	NAME STREET ADDRESS	. Change Addition -	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS	☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	name Street address		Delete	NAME STREET ADDRESS	Change Accition	
TITLE □ Delete □ 3°LE □ Change □ Addit	NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS	☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	NAME STREET ADDRESS		☐ Dele:e	NAME STREET ADDRESS	☐ Change ☐ Addition	
	TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Accilion	

Luz N. Vasquez, President, 04/17/2008 305-759-0311