## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNIIAI REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

		996				Secretary of Sta DIVISION OF CORPOR								
	OCUM Corporation N		# P94000	003	37105 (1	)								
	JAIPAC	INVESTI	MENT CORP.							4 1841484				1811 <b>68:8</b> 2 Bets 48 <b>6</b> 4
Principal Place of Business Mailing Address										1 10011001	110 13111 VIVII 301 <del>1</del> 1 0811		.(1) ( <b>4)4</b> 51 ))	imit maint atts 1661
	121 CRANDON 462	BLVD			121 CRANDON BLVD 462									
KEY BISCAYNE FL 33149				1	KEY BISCAYNE FL 33149				3. Date Incorporated or Qualified 3			of Last I	Report	
	US				U\$					05/16/1		II	7/25/1	
2.	Principal Place	e of Busines	s	2a.	Mailing Address					4, FEI Number			Ĺ	Applied For
21				26						65-04	06331			Not Applicable
22	-Suite, Apt. #, ∈  -	etc		27	Suite, Apt. #, etc.					5. Certificate o	Status Desired			5 Additional Required
	City & State				City & State					6. Election Car	npaign Financing		\$5.0	00 May Be
23	·			28	77	1				Trust Fund (		<u> </u>		led to Fees
24	- <b>Ζ</b> φ }	2	Country 5	29	Zip	30	country	1		8. This corpora Florida Statu	ition has liability for ites 🔲 Yes	intangible ta []] No	x under s	s 199.032,
			nd Address of Current		tered Agent					10. Name and	Address of New F	Registered .	Agent	
							81	Name						
	BRUGOS						82	Street	Addres	s (P.Q. Box Num	oer is Not Acceptat 多スVD	ole)		
	121 CRAN KEY BISC						83		CK		DAVE.			
	NET DISC	ATEN FL	33149					DAN,	TE	# 4621				
							84	City	Y B	is CAYNE		FL	85 3	Zip Code 33/49
1	or registered	i agent, or o	ns of Sections 607.0502 a oth, in the State of Florida the obligations of, Section	. Such	change was authorize	ed by th	e corp	named co xoration's	orporati	ion submits this s	tatement for the pur aby accept the app	rpose of cha cointment as	inging its registere	registered office ed agent. I am
_	tamiliar with, IGNATURE	алэ ассөрг	the obligations of, Section	1007.0	JOOS, FIORDS Statutes	i.								
	Silg	gnature, typod or	printed name of registered agent an					nt signature n	required w	rher: reinstahrig)		DATE		
12	2. TLE	DDC	OFFICERS AND	DIREC	TORS		<b>3.</b> 1 TITLE			ADDITIONS/	CHANGES TO OFF		DIRECT  Change	
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	REET ADDRESS		NDON BLVD			- 1		T ADDRESS						
	1Y-S1-ZiP		CAYNE FL				4 CITY-							
T/	TLF	D			DELETE	2	1 TITLE						Change	Addition
N/	AME		os Blancho, Maria	A		2	2 NAME		TER	SKEKOZ	BLANCO	INAR	AA	••
SI	REET ADDRESS		NDON BLVD 462			2	3 STREE	1 ADDRESS						
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ļ	TEF				DELETE		1 TITLE	;				L	Change	: Monition
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	TV-ST-ZIP TLE				DELETE		1 TITLE		<del> </del>			<u>-</u> -	Change	Addition
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1	REET ADDRESS							i addréss						
l	TY-ST-ZIP						4 CITY-							
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N/	AME					5	2 NAME		}					
SI	TREET ADDRESS					5	3 STREE	f ADDRESS						

14. Ido hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information indicated on this armost report or supplemental annual 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 of director of this 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 12 or Block 13 if charged by or an attachment with an address.

5 4 CITY-ST-ZIP

64 CITY - ST - ZIP

6 1 THILE

6.2 NAME 63 STREET ADDRESS

**SIGNATURE** 

CITY-ST-ZIP

STREET ADDRESS

CI1Y - S1 - ZIP

me NAME

MARÍN A. TERRESCOS - DÍRECTOR
RE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

DELETE

Change Addition

CR2E034 (12/95)