FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT *CORPORATION **ANNUAL REPORT**

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra <u>P. Montha</u>m

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400037105 (1)
JAIPAC INVESTMENT CORP.

Principal Place 121 CRANDON 482 KEY BISCAYNI			1 CRANDON BLVD						
US		US				 Date Incorporated or Qualified 05/16/1994 	3a. Date of Last Report 04/25/1996		
21	Place of Business	2a. Mailing Address 26				4, FEI Number 65-0406331			oplied For of Applicable
Sulte, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Stat 23		City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added I	May Be to Fees
Zip	Country	Zip	Cour	try		8. This corporation has liability for			. 199.032,
24	25 9. Name and Address of Curre	29	30			Florida Statutes 10. Name and Address of New F	Yes		
PDI	JGOS LOPEZ, JAIME	III DARIOTOTO WARIIT		81 Name	<u> </u>	IU, Hame and Address of New I	ionistered	- Again	
	CRANDON BLVD		1						
	462		82 Street Addres			s (P.O. Box Number is Not Accept	able)		
	BISCAYEN FL 33149			33					
ÚE 1	DISOATER TE 33148		- {						
			Ī	B4 City	VEV	BISCAYNE	FL	85 Zip (Code
SIGNATURE	am familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS AN				e required (when reinstating) ADDITIONS/CHANGES TO OFF	DATE TICERS AN	D DIRECTOR	RS IN 12
TITLE	DPS	DELETE	1.1 1(1)	E -	>-	Was, Jaine		Change	Addition
Ńame	BRUGOS LOPEZ, JAIME		1.2 NAM	ME ·	TK	www.		_	
STREET ADDRESS	121 CRANDON BLVD		1.3 STR	EE1 ADDRESS					
CITY-ST-ZIP	KEY BISCAYNE FL		1.4 C/T	r-ST-ZIP					
TITLE	D	☐ DELETE	2.1 TITL					K Change	Addition
NAME #	TERREROS BLANCO, MARTA	A .—	2.2 NA	ΛE	TER	REROS //	MARIA	14.	
STREET ADDRESS	121 CRANDON BLVD 462		2.3 STR	EET ADDRESS					
CITY-ST-ZIP	KEY BISCAYNE FL		2. 4 CIT	Y-SI-ZIP	1_				
TITLE		DELETE	3.1 1(1)	F				Change	Addition
NAME			3.2 NAM	ME					
STREET ADDRESS	[3.3 STA	EET ADDRESS					
CITY-ST-ZIP		·	3.4 CIT	Y-ST-ZIP					
TITLE .		☐ DELETE	4.1 TITL	E	1		_	Change	Addition
NAME			4. 2 NA	V1 E					
STREET ADDRESS			4.3 \$TR	EET ADDRESS					
CITY-ST-ZIP				4.4 CITY - ST - ZIP					
TITLE		DELETE	5.1 T IT(F				Change	Addition
NAME			5.2 NAM	1E					
STREET ADDRESS			5.3 STR	eet address					
CITY-ST-ZIP.	The second secon			r-ST-ZIP					
TITLE		☐ DELETE	6.1 TITE	E				Change	Addition
NAME			6.2 NAN	1E					
STREET ADDRESS			6.3 STR	EET ADDRESS	1				

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental argues 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 of 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 phanged, or on an attroorment with an address.

FILED

Jun 05 1997 8:00am

Secretary of State