2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 14, 2008 08:00 Al Secretary of State

DOCUMENT # P95000025398 1. Entity Name J.I.G. & ASSOCIATES INC.				Secretary of St			
Principal Plac 561NE 79TH 206 MIAMI, FL 3		Mailing Address 561NE 79TH ST 206 MIAMI, FL 33138 US				NA NA BI BINDA NINA NOLEN (ENI	
D	OO NOT WRITE	IN THIS SPA	CE	02052008 4. FEI Numb 65-056	No Chg-P er 8948	CR2E034 (11/05)	lied For Applicable
6. Name and Address of Current Registered Agent GUTIERREZ, JORGE 1043 SW 117TH COURT MIAMI, FL 33184			red office or registre	IN T	NOT WR	CE	nd accent
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 accepted agent SIGNIATURE Signature, typed or printed name of registered agent and tills if applicable (NOTE, Registered Agent signature required when reinstating) DATE 1 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Added to Fees 02/21/08-80099-013 150.00							
After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTO			Add	led to Fees	02/21/00)U.UU
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GUTIERREZ, JORGE 1043 SW 117TH COURT MIAMI, FL 33184						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				a.			

DO NOT WRITE IN THIS SPACE

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.

TITLE NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-SI-ZIP

IG OFFICER OR DIRECTOR