

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

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97 JUL 25 AM 10:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**PROFIT CORPORATION ANNUAL REPORT 1997**

FLORIDA DEPARTMENT OF STATE  
G. Ira B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P 95 0000 364 96**

1. Corporation Name  
**JC IMPORT EXPORT CORP.**

Principal Place of Business      Mailing Address

**13420 SW 20th Terr  
MIAMI FL 33175**

2. Principal Place of Business      2a. Mailing Address

21 **13420 SW 20th Terr**      26 State, Apt #, etc

22 City & State      27 City & State

23 **MIAMI FL**      28 **MIAMI FL**

24 Zip **33175**      25 Country **DADE**      29 Zip      30 Country

3. Date Incorporated or Qualified      3a. Date of Last Report

**5-9-95**      **1995**

4. FLL Number      Applied For

**65-0578519**      Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution       \$5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under s. 199.002, Florida Statutes       Yes       No

9. Name and Address of Current Registered Agent

**JAMILLETTE SANCHEZ  
13420 SW 20th Terr  
MIAMI FL 33175**

10. Name and Address of New Registered Agent

81 Name

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

83 City

84 City      85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE      Signature Required      Signature Required      Signature Required

**12. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	<input type="checkbox"/> DELETE
	JAMILLETTE SANCHEZ	13420 SW 20th Terr	MIAMI FL 33175	<input checked="" type="checkbox"/>
	CARLOS R. MONGELOS	13420 SW 20th Terr	MIAMI FL 33175	<input checked="" type="checkbox"/>
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
71 TITLE	72 NAME	73 STREET ADDRESS	74 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
81 TITLE	82 NAME	83 STREET ADDRESS	84 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

200002256292--8  
-08/04/97--01068--008 Addition  
\*\*\*165.00      \*\*\*165.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption provided in Section 119.07(2)(b), Florida Statutes. I further certify that the information indicated on this annual report is complete and correct to the best of my knowledge and that the signature shall have the same legal effect as if personally made by me. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and that my name appears on the list of persons who are authorized to sign such reports.

SIGNATURE: *Jamillette Sanchez* President 4/29/97

CP2EC034 (9/96)