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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Sta

Tare Land Land

	1997	DIVISION OF CORPC	DRATIONS	מו מדת ומ	MM 9:52
DOCUMENT # P9500038837 (7) JCB CAPITAL & MANAGEMENT CORP.				97 DEC 12 AM 9:52 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place	e of Business	Mailing Address			
6001 BROKEN SOUND PARKWAY. NW SUITE 408 BOCA RATON FL 33487		6001 BROKEN SOUND PARKWAY. NW SUITE 408 BOCA RATON FL 33487-2754		Date Incorporated or Qualified	
				05/16/1995	05/01/1996
2. Principal Place of Business		2a. Mailing Address 26		65-0644984	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Bo Added to Fees
Zip 24 -	Country 25	2p C	ountry		Yes 🚺 No
	9. Name and Address of Curre LESTAR MANAGEMENT CORP.		81 Name	10. Name and Address of New Reg	stered Agent
SUI	1 Broken Sound Parkway Te 408 Ca raton fl 33487	N.W.	82 Street Addr8384 City	ess (P.O. Box Number is Not Acceptable	95 Zip Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.05 egistored agent, or both, in the Stat in familiar with, and accept the obligation Signature, typed or protest name of registered as	gations of, Section 607.0505, Florida S	ahove-named corporation to a second to a s	oration submits this statement for the pu on's board of directors. I hereby accept	rpose of changing its registered the appointment as registered but a pointment as registered but the appointment as registered but the appoint
12.	The second secon	ND DIRECTORS1	3.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	BLANCHARD, JEAN C/RODRIGUEZ MARIN, 92	13 13	THEE PNAME SSTREET ADDRESS		☐ Change ☐ Addition
CITY-SI-ZIP TITLE NAME	28016 MADRID, SPAIN D BLANCHARD, CRISTINA	DELETE 2:	COTY-S1-ZP LTIFLE NAME		Change Addition
STREET ADORESS CITY-ST-ZIP	C/RODRIGUEZ MARIN, 92 28016 MADRID, SPAIN	2:	3 STREET ADDRESS 4 CITY-ST-7IP		
TITLE NAME STREET ADDRESS		3.5	TITUE PINAMU BISTREUT ADDRESS		L_ Change L, J Addition
CITY-ST-ZIP TITLE	······································	3/	4. CHY-\$1-7P		Change Addition
NAME STREET ADDRESS		4.8	2 NAME 3 STREET ADDRESS		
CITY-ST-ZIP TITLE NAME		DELETE 5:	LCHY S1-7H LTHLE NAMI	W.	Change Addition
STREET ADDRESS CITY-ST-ZIP		5.0	S STREET ADDRESS	/2	Change Addition
NAME			TITHE PINAME	400002261	3254

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 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 or director of the corporation or the receiver not 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 changed, or on an autocliniont with an address.

04/14/04