

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000070036

1. Corporation Name

**J.G. TELECOMMUNICATIONS, INC.
4755 N.W. 167 STREET
MIAMI, FL 33054**

Principal Place of Business

**4755 N.W. 167 STREET
MIAMI, FL 33054**

Mailing Address

**4755 N.W. 167 STREET
MIAMI, FL 33054**

3. Date Incorporated or Qualified
SEPT. 12, 1995

3a. Date of Last Report

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 **4545 N.W. 7 STREET**

27 Suite, Apt. #, etc.

SUITE 12

28 City & State

MIAMI, FLORIDA

29 Zip

33126

30 Country

U.S.A.

4. FEI Number
65-0606305

Applied For
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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**LAWRENCE J. SPIEGAL
AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134**

81 Name

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

83

84 City

FL 85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 typed or printed name of registered agent and board of directors

Date of filing of report of agent and board of directors

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☐ DELETE
NAME **FLEURY GOMEZ**
STREET ADDRESS **387 N.E. 191 ST., #208**
CITY-ST-ZIP **MIAMI, FL 33179**

TITLE **VP, S** ☐ DELETE
NAME **JOSE GARCIA**
STREET ADDRESS **11B TUDOR PL, STEDWICK VILLAGE**
CITY-ST-ZIP **BUDDLAK, NJ 07828**

TITLE **T** ☐ DELETE
NAME **ESTEBAN GARSON**
STREET ADDRESS **387 N.E. 191 ST., #208**
CITY-ST-ZIP **MIAMI, FL 33179**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**000001851370
-06/05/96--01022--028
***200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FLEURY GOMEZ, 4/30/96 (305)653-5976

CR2E034 (12/95)