2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000011153

Entity Name: J.C.C. INTERIORS INC.

FILED Feb 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

286 VISTA VERDE RD. 286 VISTA VERDI RD. DAVIE, FL 33325 US DAVIE, FL 33325 US

Current Mailing Address: New Mailing Address:

 286 VISTA VERDE RD.
 286 VISTA VERDI RD.

 DAVIE, FL 33325
 US

 DAVIE, FL 33325
 US

FEI Number: 65-0644833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARRASCO, JUAN C
286 VISTA VERDA RD.

DAVIE, FL 33325 US

CARRASCO, JUAN C
286 VISTA VERDI RD.
DAVIE, FL 33325 US

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.

SIGNATURE: JUAN CARRASCO 02/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 SILVA DIAZ, GRACIANO
 Name:
 SILVA DIAZ, GRACIANO

 Address:
 286 VISTA VERDE RD.
 Address:
 286 VISTA VERDI RD.

 Address.
 280 VISTA VERDE RD.
 Address.
 280 VISTA VERDI

 City-St-Zip:
 DAVIE, FL 33325
 City-St-Zip:
 DAVIE, FL 33325

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 FUNE, MARIO
 Name:
 FUNE, MARIO

 Address:
 286 VISTA VERDE RD.
 Address:
 286 VISTA VERDI RD.

 City-St-Zip:
 DAVIE, FL 33325
 City-St-Zip:
 DAVIE, FL 33325

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 CARRASCO, JUAN C
 Name:
 CARRASCO, JUAN C

 Address:
 286 VISTA VERDE RD
 Address:
 286 VISTA VERDI RD

 City-St-Zip:
 DAVIE, FL 33325
 City-St-Zip:
 DAVIE, FL 33325

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN CARRASCO PD 02/26/2007