2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 13, 2004 08:00 AM DOCUMENT # P98000102645 **Secretary of State** 1. Entity Name JUNIOR INVESTMENT CORP. Principal Place of Business Mailing Address 13000 S.W. 120 STREET MIAMI FL 33186 13000 S.W. 120 STREET MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0880831 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FROYO, ANTONIO 13000 S.W. 120 ST. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33186** City Zio Code 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 accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of repistered agont and title if apolicable (NCTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THILE ☐ Delete TITLE ☐ Change Addition CHIARI, GIANNI NAME NAME nuovooo2003a STREET ADDRESS 13000 S.W. 120 STREET STREET ADDRESS 02/13/04-80049-021 158.75 MIAMI FL 33186 CITY-ST-ZIP CITY-ST-ZIP Delete TIBLE TITLE ☐ Change ☐ Addition CHIARI, JUNIO V NAME NAME STREET ADORESS 13000 S.W. 120 STREET STREET ADDRESS MIAMI FL 33186 CHY-ST-ZP CITY - ST - ZIP TITLE Delete ☐ Change Addition Addition NAME CHIARI, MARIA L MAME STREET ADDRESS 13000 S.W. 120 STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33186 CITY-ST-ZIP TELE Delete TIBLE Change Addition FROYO, ANTONIO NAME MAME 13000 SW 120TH ST. STREET ADDRESS STREET ADDRESS MIAMI FL 33186 CITY-ST-ZIP CITY - ST-ZIP 137F Delete 33711 Change Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZiP CITY-ST-7IP THE Delete 737) F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 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.

Antonio troy

SIGNATURE

FILED