2004 FOR PROFIT CORPORATION 🛼 🗻 ANNUAL REPORT (AR)

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 06, 2004 8:00 am Secretary of State DOCUMENT # P99000069200 1. Entity Name 02-06-2004 90006 022 ***150 00 JOLAN INVESTMENTS INC. Principal Place of Business Mailing Address 3 GROVE ISLE 3 GROVE ISLE BUILDING 3, UNIT 408 COCONUT GROVE FL 33133 BUILDING 3, UNIT 408 COCONUT GROVE FL 33133 2. Principal Place of Business 3. Mailing Address 2450 S.W. 137 AV . Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) 501tc 225 City & State City & State 4. FEI Number Applied For MAMI, FloriDA 65-0938752 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired U.S.A 33175 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PARLADE, ALBERTO J ESQ. Street Address (P.O. Box Number is Not Acceptable) 7050 SW 86TH AVENUE **MIAMI FL 33143** City Zip 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 registered agent and title if applicable. (NOTE: 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITLE ☐ Defete TITLE ROMERO, ADALBERTO NAME NAME STREET ADDRESS STREET ADDRESS 3 GROVE ISLE BLDG 3, UNIT 408 CITY-ST-2P COCONUT GROVE FL 33133 CITY-ST-7IP ☐ Change TITLE / ☐ Defete TITLE ☐ Addition ROMERO, JORGE A NAME NAME .. STREET ADDRESS 3 GROVE ISLE BLDG 3, UÑIT 408 STREET ADDRESS CITY-ST-ZIP COCONUT GROVE FL 33133 CITY-ST-ZIP Delete SVD ☐ Change ☐ Addition TITLE TITLE NAME ROMERO, LUIS M NAME STREET ADDRESS 3 GROVE ISLE BLDG 3, UNIT 408 STREET ADDRESS CITY-ST-ZIP COCONUT GROVE FL 33133 CITY-ST-ZIP TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition ROMERO, MARAH NAME NAME 3 GROVE ISLE BLDG 3, UNIT 408 STREET ADDRESS STREET ADDRESS COCONUT GROVE FL 33133 CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I 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 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.

FILED