

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000069200

Entity Name: JOLAN INVESTMENTS INC.

FILED
Mar 22, 2005
Secretary of State

Current Principal Place of Business:

2450 SW 137 AVE.
STE 225
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

3 GROVE ISLE
BUILDING 3, UNIT 408
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 65-0938752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARLADE, ALBERTO J ESQ.
7050 SW 86TH AVENUE
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROMERO, ADALBERTO
Address: 3 GROVE ISLE BLDG 3, UNIT 408
City-St-Zip: COCONUT GROVE, FL 33133

Title: VD () Delete
Name: ROMERO, JORGE A
Address: 3 GROVE ISLE BLDG 3, UNIT 408
City-St-Zip: COCONUT GROVE, FL 33133

Title: SVD () Delete
Name: ROMERO, LUIS M
Address: 3 GROVE ISLE BLDG 3, UNIT 408
City-St-Zip: COCONUT GROVE, FL 33133

Title: TD () Delete
Name: ROMERO, MARAH
Address: 3 GROVE ISLE BLDG 3, UNIT 408
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ADALBERTO ROMERO

PD

03/22/2005

Electronic Signature of Signing Officer or Director

_____ Date