FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

5-1-95 B- W054 C

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

APPROVED

95 MAY 1 PM 3:20

DOCUMENT # S35912 (2)

1. Corporation Name

J.C. INVESTMENTS CORP.

Principal Place of Business	Mailing Address
PO BOX 651468 MIAMI FL 33265 US	PO BOX 651468 MIAMI FL 33265 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/06/1991
3a. Date of Last Report: 04/13/1994

2. Principal Place of Business (21) / 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) / (27)

City & State (23) / (28)

Zip (24) / County (25) / Zip (29) / County (30)

4. FEI Number: 65-0270593 — 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 § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FALERO, JOSE M.
5701 COLLINS AVE #914
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81 Name: CELESTE FALERO
82 Street Address (P.O. Box Number is Not Acceptable): 5701 Collins Avenue
83: Apt 941
84 City: MIAMI BEACH FL 85 Zip Code: 33140

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.

NATURE: Celeste Falero — 4/26/95
(Signature of New Registered Agent, if changing) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
7 TITLE	PD	8 TITLE	☒ Change ☐ Addition
8 NAME	FALERO, JOSE M.	9 NAME	DELETE NO LONGER AN OFFICER
9 STREET ADDRESS	5701 COLLINS AVE #914	10 STREET ADDRESS	
10 CITY ST ZIP	MIAMI BEACH FL	11 CITY ST ZIP	
11 TITLE	STD	12 TITLE	PRESIDENT/STD ☒ Change ☐ Addition
12 NAME	FALERO, CELESTE	13 NAME	FALERO, CELESTE
13 STREET ADDRESS	5701 COLLINS AVE #914	14 STREET ADDRESS	5701 COLLINS AVE #914
14 CITY ST ZIP	MIAMI BEACH FL	15 CITY ST ZIP	MIAMI BEACH FL. 33140
15 TITLE		16 TITLE	☐ Change ☐ Addition
16 NAME		17 NAME	
17 STREET ADDRESS		18 STREET ADDRESS	
18 CITY ST ZIP		19 CITY ST ZIP	
19 TITLE		20 TITLE	☐ Change ☐ Addition
20 NAME		21 NAME	
21 STREET ADDRESS		22 STREET ADDRESS	
22 CITY ST ZIP		23 CITY ST ZIP	
23 TITLE		24 TITLE	☐ Change ☐ Addition
24 NAME		25 NAME	
25 STREET ADDRESS		26 STREET ADDRESS	
26 CITY ST ZIP		27 CITY ST ZIP	
27 TITLE		28 TITLE	☐ Change ☐ Addition
28 NAME		29 NAME	
29 STREET ADDRESS		30 STREET ADDRESS	
30 CITY ST ZIP		31 CITY ST ZIP	

14. I do hereby certify that the information supplied with this report is accurately furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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 added to the report.

SIGNATURE: Celeste Falero — 4/26/95 — 305 867 1940
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone)

0432068 FP