

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V35858** (2)

1. Corporation Name

JEC CONSULTING CORP.



Principal Place of Business

**17698 SW 11 ST.
PEMBROKE PINES FL 33029**

Mailing Address

**17698 SW 11 ST.
PEMBROKE PINES FL 33029**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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9. Name and Address of Current Registered Agent

**CONTRERAS, JULIE
17698 SW 11 ST.
PEMBROKE PINES FL 33029**

3. Date Incorporated or Qualified

06/01/1992

3a. Date of Last Report

03/09/1995

4. FEI Number

65-0334708

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 s. 199.032,
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81

Name

Julie C. Cocuy

82

Street Address (P.O. Box Number is Not Acceptable)

Same

83

84

City

Same

FL

Zip Code

Same

11. Pursuant to the provisions of Sections 607.0302 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 I accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Julie Cocuy

(NOTE: Registered Agent signature required when changing)

4/2/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**D
CONTRERAS, JULIE
17698 SW 11 ST.
MIAMI FL**

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/96 3054310611

CR2E034 (12/95)