

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000048624

**FILED**  
**Apr 28, 2016**  
**Secretary of State**  
**CC3107539782**

**Entity Name:** L. JONES PROPERTIES SEVEN, INC.

**Current Principal Place of Business:**

8500 NW 22 AVENUE  
MIAMI, FL 33147

**Current Mailing Address:**

PO BOX 470815  
MIAMI, FL 33247 US

**FEI Number:** 45-5633758

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JONES, LEONZIE  
8500 NW 22 AVENUE  
MIAMI, FL 33147 US

*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

**Officer/Director Detail :**

Title PD  
Name JONES, LEONZIE  
Address 8500 NW 22 AVENUE  
City-State-Zip: MIAMI FL 33147

Title VP  
Name JONES, ANTWAINE L  
Address 8500 NW 22 AVENUE  
City-State-Zip: MIAMI FL 33147

Title SECRETARY  
Name JONES, FLONNIE M  
Address PO BOX 470815  
City-State-Zip: MIAMI FL 33247

*I hereby 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 all other like empowered.*

**SIGNATURE:** LEONZIE JONES

**PRESIDENT**

**04/28/2016**

Electronic Signature of Signing Officer/Director Detail

Date