

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000091225

**Entity Name:** JAKS & CO. REALTY GROUP, LLC**Current Principal Place of Business:**6955 NW 52ND ST UNIT 10  
MIAMI, FL 33166**Current Mailing Address:**6955 NW 52ND ST UNIT 10  
MIAMI, FL 33166 US**FEI Number:** 86-2164026**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DIXSON, JULIE I  
6955 NW 52ND ST UNIT 10  
MIAMI, FL 33131 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           | CEO                     |
| Name            | COHEN, KAREN J          |
| Address         | 6955 NW 52ND ST UNIT 10 |
| City-State-Zip: | MIAMI FL 33166          |

|                 |                         |
|-----------------|-------------------------|
| Title           | COO                     |
| Name            | DIXSON, JULIE I         |
| Address         | 6955 NW 52ND ST UNIT 10 |
| City-State-Zip: | MIAMI FL 33166          |

|                 |                         |
|-----------------|-------------------------|
| Title           | CFO                     |
| Name            | COHEN, STEWART D        |
| Address         | 6955 NW 52ND ST UNIT 10 |
| City-State-Zip: | MIAMI FL 33166          |

|                 |                         |
|-----------------|-------------------------|
| Title           | CIO                     |
| Name            | COHEN, ADDISON D        |
| Address         | 6955 NW 52ND ST UNIT 10 |
| City-State-Zip: | MIAMI FL 33166          |

*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:** KAREN COHEN**MANAGER****02/20/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date