2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 663464

FILED Apr 29, 2005 08:00 AM Secretary of State

1. Entity Nam JENCO F	REALTY, INC.	`			
Principal Place *4561 N W 10 : APT H-110 : PLANTATION	OTH COURT	failing Address 4561 N W 10TH COURT APT H-110 PLANTATION, FL 33313			
وقدان ماجر بین در دهران کامور بید دهران کامور در در در در در					
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	O NOT WRITE I	N THIS SPA	CE	4. FEI Number	Appled For
A SHOW THE STATE OF THE STATE O				59-1970991	Not Applicable
THE RESERVE TO		THE TOTAL CONTROL NAME OF THE PARTY OF THE P		5. Certificate of Status Desi	red Fee Required
-	6. Name and Address of Current Regis	stered Agent	Second Pitz in	· / James - Frankling salami had selem had	
ELBRAND, LOUIS 4561 NW 10TH COURT - SUITE H-110 PLANTATION, FL 33313				DO NOT	*** <i>Ex</i>
			Strange and the state of the st		
SIGNATURE.	Signature, typed or printed name of registered agent and title E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	• II applicable. (NOTE: Register 9. Election Campaign Fina Trust Fund Contribution.	ed Agent signature required noting \$5.	Honoos	344291 80130-008 150.00
10.	OFFICERS AND DIRE	CTORS			14A
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELBRAND, ELLEN 4561 N.W. 10TH COURT H-110 PLANTATION, FL 33313	.			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ELBRAND, LOUIS 4561 N.W. 10TH COURT, H-110 PLANTATION, FL 33313		The second secon		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT	WRITE
TITLE NAME		•		IN THIS	SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

Louis P. Elbrand

W 4/25/05

914-739-7613

Daytime Phone #