2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 05, 2008 08:00 A Secretary of State **DOCUMENT # P99000049821** 1. Entity Name J P. GLOBAL COMPANY Principal Place of Business Mailing Address 1866 SHOWER TREE WAY **1866 SHOWER TREE WAY** WELLINGTON, FL 33414 WELLINGTON, FL 33414 CR2E034 (11/05) 03022008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number -65-0928777 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARVAJAL, JORGE DO NOT WRITE 1866 SHOWER TREE WAY WELLINGTON, FL 33414 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (MOTE: Registered Agent signature required when rematating) DATE U000000848120 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 15 \$150.00 03/20/08-80005-012 158.75 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME CARVAJAL, JORGE: STREET ADDRESS 1866 SHOWER TREE WAY CITY-ST-7/P WELLINGTON, FL 33414 TILLE NAME **ASTUDILLO, PATRICIA** STREET ADORESS 1866 SHOWER TREE WAY CITY-ST-ZIP WELLINGTON, FL 33414 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental eport 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 true re 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 a

^-	-	B. B		-	-	_
• 1	-	м	A I		ı	E:
-			-			

TILLE NAME STREET ADDRESS CITY-ST-ZIP