


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90010 047 ***150.00

DOCUMENT # P99000107596			
1. Entity Name JACA, INC.			
Principal Place of Business 9600 W SAMPLE RD POMPANO BEACH, FL 33065		Mailing Address P O BOX 771717 CORAL SPRINGS, FL 33077	
2. Principal Place of Business		3. Mailing Address <i>PO. BOX 8847</i>	
Suite, Apt. #, etc. <i>SUITE 501</i>		Suite, Apt. #, etc.	
City & State <i>CORAL SPRINGS</i>		City & State <i>CORAL SPRINGS FL</i>	
Zip		Zip <i>33075</i>	
Country		Country <i>USA</i>	
4. FEI Number 65-0967603		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required <input type="checkbox"/>	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SERBIN, JAY 11231 NW 5 STREET CORAL SPRINGS, FL 33071		Name	
		Street Address (P.O. Box Number is Not Acceptable) <i>9600 W SAMPLE RD STE 501</i>	
		City <i>CORAL SPRINGS</i> FL Zip Code <i>33065</i>	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DMP SERBIN, JAY 11231 NW 5 ST CORAL SPRINGS, FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>9600 W SAMPLE RD STE 501 CORAL SPRINGS, FL 33065</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SERBIN, CAROL 11231 NW 5 ST CORAL SPRINGS, FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>9600 W SAMPLE RD STE 501 CORAL SPRINGS, FL 33065</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Jay Serbin</i> JAY SERBIN		Date: <i>1/12/04</i> Daytime Phone #: <i>954-346-1996</i>	