2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 20, 2006 08:00 AM DOCUMENT # P99000107596 Secretary of State 1. Entity Name JACA, INC. Mailing Address Principal Place of Business 9600 W SAMPLE RD P.O.BOX 8847 CORAL SPRINGS, FL 33075 SUITE 501 CORAL SPRINGS, FL 33065 No Cha-P CR2E034 (11/05) 01142006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0967603 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SERBIN, JAY DO NOT WRITE 9600 W SAMPLE RD STE 501 CORAL SPRINGS, FL 33065 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. (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and file if applicable, 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. DMP TITLE SERBIN, JAY NAME STREET ADDRESS 9600 W. SAMPLE RD. STE-501 CORAL SPRINGS, FL 33065 City-ST-ZiP TITLE VPD SERBIN, CAROL 11000000391893 81/24/06-80060-007 15**0.00** NAME STREET ADDRESS 9600 W.SAMPLE RD. STE-501 CORAL SPRINGS, FL 33065 CITY-ST-ZIP DDE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP m F STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 cath; 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

HAY JENE JAY SENGIN

s. /(6)

954-346-1996

Daytime Phone #

FILED