


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 20, 2004 8:00 am
Secretary of State

08-20-2004 90002 024 ***150.00

DOCUMENT # P99000036320	
1. Entity Name JALABAPA, INC.	

Principal Place of Business 126 SYDNEY PL YULEE, FL 32209	Mailing Address 126 SYDNEY PL YULEE, FL 32209
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2. Principal Place of Business 76043 Sidney Place	3. Mailing Address 76043 Sidney Place
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Yulee, FL	City & State Yulee, FL
Zip 32097	Zip 32097
Country U.S.A.	Country U.S.A.



08132004 Chg-P CR2E034 (10/03)

4. FEI Number 59-3570742	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FAIRCHILD, RONALD D 1000 RIVERSIDE AVE. STE. 500 JACKSONVILLE, FL 32204

7. Name and Address of New Registered Agent Name RAMANBHAI P. PATEL Street Address (P.O. Box Number is Not Acceptable) 12873 Captiva Ct. City Jacksonville FL Zip Code 32225

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 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PATEL, CHIRAYU 126 SIDNEY PL YULEE, FL 32097 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PATEL, RAMAN R 126 SYDNEY PL YULEE, FL 32097 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KANCHAN, R. PATEL 126 SYDNEY PL YULEE, FL 32097 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PATEL CHIRAYU 12873 Captiva Ct. Jacksonville, FL 32225 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PATEL RAMANBHAI P. 12873 Captiva Ct. Jacksonville, FL 32225 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PATEL KANCHANBEN R. 12873 Captiva Ct. Jacksonville, FL 32225 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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:  **RAMANBHAI P. PATEL** 8/15/04 904-225-