## **2005 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

**DOCUMENT # 371833** 



FILED Apr 12, 2005 8:00 am Secretary of State

Entity Name     JA-ME-JA CORPORATION								04-12-200	03 90123	020	150	
Principal Place of Business Mailing Address												
			200 SOUTH ORANGE AVENUE SARASOTA, FL 34236									
2. Principal Place of Business 3.			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03152005	Chg-P	CR	2E034 (10	/03)	
City & State			City & State				4. FEI Number 59-0900777				Applied For Not Applicable	
Žip	Zip Country		Zip	Country	/	5. Certificate of Status Desir			ed S8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent							7. Name and	Address of Ne	w Register	red Agent		
					Name							
WAGNER, E. JOHN II 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236					Street Address (P.O. Box Number is Not Acceptable)							
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
		City						FL Zip	Code	e		
	e named entity tions of registe		the purpose of changing its	s registered	l office or t	registere	ed agent, or bo	oth, in the State o	of Florida. 1	am familiar	with,	and accept
SIGNATURE.	Signature, typed o	r printed name of registered agent a	nd title if applicable. (NOT	E: Registered A	lgent signature	re required	when reinstating)		DA	ATE		<del></del>
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.												
After M	E NOW!!! ay 1, 2005	FEE IS \$150.00 Fee will be \$550.0				<b>\$5.</b> ! Adde	00 May Be ed to Fees					
After M	ay 1, 2005	FEE IS \$150.00 Fee will be \$550.0 OFFICERS AND	Trust Fund Cont			<b>\$5.</b> ! Adde		/CHANGES TO	OFFICERS	AND DIREC	TOR	S IN 11
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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: James E Sourcers

813-641-7612 Daytime Phone #