FILED
Jul 14, 2008 8:00 am
Secretary of State
07-14-2008 90033 010 ***550.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 395265

1. Entity Name:
JEFFROSE, INC.

Principal Place of Business	Mailing Address
2875 NE 191 STREET - SUITE 404 AVENTURA, FL 33180 US	2875 NE 191 STREET - SUITE 404 AVENTURA, FL 33180 US

DO NOT WRITE IN THIS SPACE

01082008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1456882
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

REINHARD, SANFORD N
2875 NE 191 STREET - SUITE 404
AVENTURA, FL 33180

DO NOT WRITE 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) (Note: Registered Agent signature required when changing) (Date)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	ST
NAME	SACKS, JEFF
STREET ADDRESS	170 WEXFORD CRESCENT
CITY-ST-ZIP	MONTREAL, CANADA, CA H3X 1E2
TITLE	P
NAME	SACKS, CELIA
STREET ADDRESS	170 WEXFORD CRESCENT
CITY-ST-ZIP	MONTREAL, CANADA, CA H3X 1E2
TITLE	VP
NAME	SACKS, ROSE
STREET ADDRESS	170 WEXFORD CRESCENT
CITY-ST-ZIP	MONTREAL, CANADA, CA H3X 1E2
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 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: Jeff Sacks Sec
(Signature and Typed or Printed Name of Signing Officer or Director) (Date) (Position Phrase)