

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 8:00 am
Secretary of State

01-19-2007 90036 042 ***150.00

DOCUMENT # 519186

1. Entity Name
JAC-JAN, INC.



Principal Place of Business
**1501 N.W. BOCA RATON BLVD.
BOCA RATON, FL 33432**

Mailing Address
**1501 N.W. BOCA RATON BLVD.
BOCA RATON, FL 33432**

60003783



2. Principal Place of Business - No P.O. Box #

3. Mailing Address
1696 S.E. 4TH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01162007 Chg-P CR2E034 (12/06)

City & State

City & State
DEERFIELD BEACH, FL

4. FEI Number
52-9482989

Applied For
Not Applicable

Zip

Country

Zip
33441

Country

BROWARD

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VULTAGGIO, AUGUSTINO
1501 N.W. BOCA RATON BLVD.
BOCA RATON, FL 33432**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **VULTAGGIO, AGOSTINO**
STREET ADDRESS **17782 FOXBOROUGH LN**
CITY-ST-ZIP **BOCA RATON, FL 33496**

TITLE **V** ☐ Delete
NAME **VULTAGGIO, GIUSEPPE**
STREET ADDRESS **1696 SE 4TH ST**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33441**

TITLE **S** ☐ Delete
NAME **LOPICCOLO, PIETRA**
STREET ADDRESS **4110 NW 3RD AVE**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Agostino Vultaggio**, **AGOSTINO VULTAGGIO**, 1/16/07 954-596-0711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #