


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 849275		
1. Entity Name JENNY ENGINEERING CORP., INC.		

SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAR 15 PM 12:31

Principal Place of Business 2 EDISON PLACE SPRINGFIELD, NJ 07081 US	Mailing Address 2 EDISON PLACE SPRINGFIELD, NJ 07081 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



03132006 Chg-P CR2E034 (11/05)

4. FEI Number 22-1809955	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent OLSON, GEORGE, JR. 12043 HIDDEN HILLS DRIVE JACKSONVILLE, FL 32225	7. Name and Address of New Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Rd. City Plantation FL Zip Code 33324
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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.

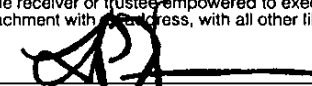
SIGNATURE  Sandra Ortega Assistant Secretary 03-15-06 DATE

(NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO JENNY, ROBERT J. 406 SUMMIT ROAD MOUNTAINSIDE, NJ 07092 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700068560367 Change <input type="checkbox"/> Addition 03/24/06--01006--019 **8.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JENNY, MARCELLINE D 406 SUMMIT ROAD MOUNTAINSIDE, NJ 07092 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700068560367 Change <input type="checkbox"/> Addition 03/24/06--01006--020 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ECC MCDEMOTT, RICHARD J. 80 SUTTON RD. CALIFON, NJ 07830 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DONDE, PRAKASH M. 20 DEERWOOD TRAIL, WEST WARREN, NJ 07059 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV KWIATKOWSKI, THOMAS P 45 OBERLIN ST MAPLEWOOD, NJ 07040 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition

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 my address, with all other like empowered.

SIGNATURE:  Thomas P. Kwiatkowski 03/14/06 973-379-6699 ext. 103

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

M. Williams MAR 16 2006