
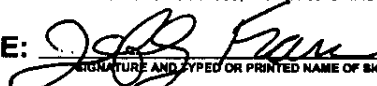


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2008 08:00 AM
Secretary of State

DOCUMENT # F00000007221		
1. Entity Name JEFFREY FRANC CO., INC.		
Principal Place of Business 8150 TWIN LAKE DR BOCA RATON, FL 33496	Mailing Address 8150 TWIN LAKE DR BOCA RATON, FL 33496	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent FRANC, JEFF 8150 TWIN LAKE DR. BOCA RATON, FL 33436		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRANC, JEFFREY 8150 TWIN LAKE DR BOCA RATON, FL 33496	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRANC, NADINE 8150 TWIN LAKE DR BOCA RATON, FL 33496	
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TITLE 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: 		3/19/08 561-470 0408 <small>Date Daytime Phone #</small>



03202008 No Chg-P CR2E034 (11/05)

4. FEI Number 04-3067655	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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04/15/08-80079-002 150.00

**DO NOT WRITE
IN THIS SPACE**