

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000006565

1. Entity Name
JETMORE JR ENTERPRISES, INC.



Principal Place of Business
**7060 75TH STREET N
PINELLAS PARK, FL 33781**

Mailing Address
**7060 75TH STREET N
PINELLAS PARK, FL 33781**



06272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5591526

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**COMPUTECH ACCOUNTING SYSTEMS, INC.
1631 COMMERCE AVENUE N
SAINT PETERSBURG, FL 33742**

**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 reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JETMORE, DAVID C JR 7060 75TH STREET N PINELLAS PARK, FL 33781
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JETMORE, DIANE L 7060 75TH STREET N PINELLAS PARK, FL 33781
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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07/06/07-80007-004 150.00

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/07

727-443-7526

Date

Daytime Phone #