

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # G92703

1. Entity Name
JORGE PEREZ ACCOUNTING, INC.



Principal Place of Business
**3032 SW PORPOISE CIRCLE
 STUART, FL 34997 US**

Mailing Address
**3032 SW PORPOISE CIRCLE
 STUART, FL 34997 US**

DO NOT WRITE IN THIS SPACE



04092008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2380310	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PEREZ, JORGE
 3032 SW PORPOISE CIRCLE
 STUART, FL 34997**

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**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

U00000897737
 04/25/08-80059-008 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PEREZ, JORGE 3032 SW PORPOISE CIRCLE STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PEREZ, BETTY L 3032 SW PORPOISE CIRCLE STUART, FL 34997
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PEREZ, GEORGE H 4849 NW 20TH PLACE COCONUT CREEK, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Jorge Perez President 4/9/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #