2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H79590 1. Entity Name JENTECH CONSULTING INC.



Principal Place of Business

3996 SNOWY EGRET DR. MELBOURNE, FL 32904-9518 Mailing Address

3996 SNOWY EGRET DR. MELBOURNE, FL 32904-9518

FILED Apr 08, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

4. FEi Number	Applied For
59-2597794	Not Applicable
	<u> </u>

5. Certificate of Status Desired

04052005

\$8.75 Additional Fee Required

CR2E034 (10/03)

6. Name and Address of Current Registered Agent

JENSEN, DANIEL LEE 3996 SNOWY EGRET DR. MELBOURNE, FL 32904-9518

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

	named entity submits this statement for the plons of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and little	If applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET AODRESS CITY-ST-ZIP	PD JENSEN, DANIEL LEE 3996 SNOWY EGRET DR. MELBOURNE, FL 329049518				U00000293 5 35
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD JENSEN, BILLIE SUE 3996 SNOWY EGRET DR. MELBOURNE, FL 329049518				000000293535 04/08/05-80032-019 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.					