2007 FOR PROFIT CORPORATION ANNU*K*L RÉPORT

FILED Apr 04, 2007 08:00 AM Secretary of State **DOCUMENT # H91636** 1. Entity Name JAPIÉR, INC. Principal Place of Business Mailing Address 71 SE 4TH AVE 71 SE 4TH AVE DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 No Cha-P CR2E034 (11/05) 03102007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2615822 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COLLIER, GWEN C DO NOT WRITE 71 S E 4TH AVE DEERFIELD BEACH, FL 33441 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Apent signature regused when reinstating) Unnomberesee 9. Electron Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Added to Fees 04/10/07-80088-013 150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE PIERCE, JOANNE NAME STREET ADDRESS **3772 BOULDER TRAIL** CITY-ST-ZIP MARTINEZ, GA 30907 AST TITLE PIERCE, BRADLEY NAME STREET ADDRESS 3420 LAKE N TRAIL GAINESVILLE, GA 30506 CITY-ST-ZIP VST TITLE COLLIER, GWEN C NAME STREET ADDRESS 71 SE 4TH AVE DO NOT WRITE DEERFIELD BEACH, FL 33441 CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 aprilddress, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

G OFFICER OR DIRECTOR

Murch 26,2007