2006 FOR PROFIT CORPORATION

FILED Mar 06, 2006 08:00 AM **ANNUAL REPORT DOCUMENT # J11356 Secretary of State** 1. Entity Name EDJ SERVICE, INC. Principal Place of Business Mailing Address 4861 SW 106 AV 1700 SW 68 AVE FORT LAUDERDALE, FL 33317 FORT LAUDERDALE, FL 33328 03032006 No Chg-P CRZE034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2818923 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PAGNI, EVELYN R. DO NOT WRITE 1700 S.W. 68TH AVE PLANTATION, FL 33317 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 egent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE . Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME PAGNI, EVELYN R. STREET ADDRESS 1700 S.W. 68TH AVE. CITY-ST-ZIP PLANTATION, FL TITLE NAME STREET ADDRESS HOODON456272 CITY-ST-ZIP 18/16/06 80023-003 198.75 TITLE MARKE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS COY-ST-702 7172.E 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 end that my signature shall have the same legal effect as if made under ceth, that I am an officer or director of the curporation or the receiving of 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 affairment with an address, with all office, like empowered.

SIGNATURE

MARKE STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND OFFICE OR PRINTED NAME OF SIGNING OFFICER OR ORECTOR