2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 09, 2005 08:00 AM **DOCUMENT # J34935 Secretary of State** JANCAR DEVELOPMENT, INC. Principal Place of Business Mailing Address 450 NORTHMOON AVE N 450 NORTHMOON AVE N ST PETERSBURG, FL 33702 ST PETERSBURG, FL 33702 US 03072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2775559 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DENNIE, JANET DO NOT WRITE 450 NORTHMOOR AVE. N. SAINT PETERSBURG, FL 33702 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 Synature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ST TITLE DENNIE, JANET STREET ADDRESS 450 NORTHMOOR AVE. N. CITY-ST-ZIP ST. PETERSBURG, FL 33702 U00000256422 03/09/05-80015-004 158.75 DENNIE, MORGAN STREET ADDRESS 450 NORTHMOOR AVE. N. CITY-ST-ZIP ST. PETERSBURG, FL VP TITLE DENNIE ADAM P NAME STREET ADDRESS 2843 29TH AVE NORTH DO NOT WRITE CITY-ST-ZIP ST PETERSBURG, FL 33312 IN THIS SPACE TITLE STREET AUDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CTY-51-21P TITLE SMAN 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.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED