


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2005 08:00 AM
Secretary of State

DOCUMENT # J39608
 1. Entity Name
JUPITER MOTORS, INC.



Principal Place of Business Mailing Address
1612 N U.S. HWY 1 **1612 N U.S. HWY 1**
JUPITER, FL 33469 **JUPITER, FL 33469**

DO NOT WRITE IN THIS SPACE



07012005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-2731228 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MATALON, ELIOT
6253 WINDING LAKE DR
JUPITER, FL 33458

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

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MATALON, ELIOT
STREET ADDRESS	6253 WINDING LAKE DR
CITY-ST-ZIP	JUPITER, FL
TITLE	ST
NAME	MATALON, CLAIRE A.
STREET ADDRESS	6453 WINDING LAKE DR
CITY-ST-ZIP	JUPITER, FL
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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 07/05/05-80035-019 158.75

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Claire Matalon **CLAIRE MATALON** 6/30/05 561-744-6801
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #