

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K36593

Entity Name: J. A. S. INVESTMENTS, INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

8760 TWIN LAKE DR.
BOCA RATON, FL 33496

New Principal Place of Business:

5332 BOCA MARINA CIRCLE N.
BOCA RATON, FL 33487 US

Current Mailing Address:

8760 TWIN LAKE DR.
BOCA RATON, FL 33496

New Mailing Address:

5332 BOCA MARINA CIRCLE N.
BOCA RATON, FL 33487 US

FEI Number: 65-0082929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARON, JAMES A.
8760 TWIN LAKE DR.
BOCA RATON, FL 33496 US

Name and Address of New Registered Agent:

SHARON, JAMES A.
5332 BOCA MARINA CIRCLE N.
BOCA RATON, FL 33487 US

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.

SIGNATURE: JAMES A. SHARON

01/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHARON, JAMES A.,
Address: 8760 TWIN LAKE DR.
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHARON, JAMES A.,
Address: 5332 BOCA MARINA CIRCLE N.
City-St-Zip: BOCA RATON, FL 33487 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES A. SHARON

PD

01/05/2005

Electronic Signature of Signing Officer or Director

Date