

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K83349

Entity Name: JOBMASTER INC.

FILED
Jan 03, 2008
Secretary of State

Current Principal Place of Business:

2609 S. SANFORD AVE.
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

2609 S. SANFORD AVE.
SANFORD, FL 32773 US

New Mailing Address:

FEI Number: 59-3013253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOROWSKI, DAVID J SR
944 S PENINSULA DR
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

BOROWSKI, DAVID J SR
550 FISHER ROAD
WINTER SPRINGS, FL 32708 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: DAVID J BOROWSKI SR

01/03/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCE () Delete
Name: BOROWSKI, DAVID J SR
Address: 550 FISHER RD.
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: VP () Delete
Name: BOROWSKI, CATHERINE M
Address: 550 FISHER RD
City-St-Zip: WINTER SPRINGS, FL 32708 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID J BOROWSKI SR

DCE

01/03/2008

Electronic Signature of Signing Officer or Director

Date