2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L00736

Entity Name: JEM OF VENICE, INC.

FILED Jun 26, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1700 S. TAMIAMI TRAIL 550 WEST FLAMINGO DRIVE VENICE, FL 34293

UNIT 1

VENICE, FL 34285

Current Mailing Address: New Mailing Address:

550 WEST FLAMINGO DRIVE 1700 S. TAMIAMI TRAIL

VENICE, FL 34293 UNIT 1

VENICE, FL 34285

FEI Number: 65-0129866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILSON, MARY BETH WILSON, MARY BETH 1700 S. TAMIAMI TRAIL 550 WEST FLAMINGO DRIVE VENICE, FL 34293 UNIT 1

VENICE, FL 34293 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: 06/26/2006

> Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition WILSON, MARY BETH Name: Name: WILSON, MARY BETH 1700 S. TAMIAMI TRAIL 550 WEST FLAMINGO DRIVE Address: Address:

VENICE, FL 34285 City-St-Zip: VENICE, FL 34293 City-St-Zip:

() Delete Title: Title: DST (X) Change () Addition

ZACCARDELLI, ELMO Name: Name: ZACCARDELLI, ELMO 1700 S. TAMIAMI TRAIL Address: 550 WEST FLAMINGO DRIVE Address: VENICE, FL 34293 VENICE, FL 34285 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY BETH WILSON DP 06/26/2006