

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 05, 2008 8:00 am**  
**Secretary of State**

08-05-2008 90004 023 \*\*\*150.00

<b>DOCUMENT # L69903</b> 1. Entity Name <b>JERRY'S ARTARAMA SOUTH, INC.</b>					
Principal Place of Business <b>270 SOUTH FEDERAL HIGHWAY DEERFIELD BEACH, FL 33441</b>			Mailing Address <b>ACCOUNTING DEPARTMENT P.O. BOX 58638-DB RALEIGH, NC 27658</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>Accounting Department</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>6104 Maddy Oaks Court</i>			
City & State		City & State <i>Raleigh NC</i>			
Zip	Country	Zip <i>27616</i>	Country <i>USA</i>	4. FEI Number <b>65-0194057</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GOLDSTEIN, GERALD 7579 IMPERIAL DRIVE BOCA RATON, FL 33319</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>GOLDSTEIN, GERALD</b> <b>7579 IMPERIAL DRIVE</b> <b>BOCA RATON, FL</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>GOLDSTEIN, DAVID</b> <b>2 NORTHWOOD CT</b> <b>WOODBURY, NY</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>GOLDSTEIN, IRA</b> <b>7240 MANOR OAK DRIVE</b> <b>RALEIGH, NC 27615</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO</b> <b>MARCUS, ROBERT</b> <b>5325 DEPUTER DR.</b> <b>RALEIGH, NC 27616</b> <input type="checkbox"/> Delete <i>6104 Maddy Oaks Court</i>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 or without other like empowered.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>7/7/08</b> Daytime Phone # <b>919-878-6782</b>		