2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Jul 13, 2004 8:00 am Secretary of State 07-13-2004 90003 043 ***150.00 DOCUMENT, # M13175 1. Entity Name JEANERATION, INC. Principal Place of Business Mailing Address 54062157 1925 BRICKELL AVE 1455 N.W. 107 AVENUE MIAMI, FL 33172 D-2013 MIAMI, FL 33129 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07012004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-2552732 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GOMEZ, OLGA 1455 NW 107 AVENUE Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33172 City Zip Code nant for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this state the obligations of gistered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. Γ Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PS TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GOMEZ, OLGA M NAME STREET ADDRESS 1925 BRICKELL AVE D-2013 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33129 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition GOMEZ, GUILLERMO NAME NAME STREET ADDRESS 1935 BRICKELL AVE D-2013 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33129 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 emporared to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 is changed, or on an attachingent with an address, with all gliner like empowered.

FICER OF BIRECTOR

FILED

y name appears in Block 10 or Block 11 if

Daytime Phone #

Affachment

54062157

JEANERATION INC 1455 NW 107 AVENUE MIAMI, FL 33172

July 1, 2004

Florida Department of State Division of Corporations Tallahassee, Fl 32399

Ref: JEANERATION INC Doc.# M13175

To Whom It May Concern:

We are writing this letter because our Uniform Business Report was never received during 2004. We have enclosed a copy of the 2004 report with a check in the amount of \$150.00 due for the 2004 fee. We ask that you please waive the penalty because the report nor a notice was ever received regarding our Corporation. We apologize for any inconvenience this may cause you. Your prompt attention will be greatly appreciated.

Thank you,

President