## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M41430

Name:

Address:

City-St-Zip:

GILES, JANET L

DAVIE, FL 33330 US

12575 ORANGE DRIVE, SUITE 302

Entity Name: J. CARROLL ENTERPRISES, INC.

FILED Apr 18, 2006 Secretary of State

| Current P                                     | rincipal Place   | e of Business:   | New Principal Place o                       | New Principal Place of Business:             |  |
|---|--|--|---|--|--|
|   | ANGE DRIVE   |  |   |  |  |
| #302<br>DAVIE, FL                             | 33330 US   | i  |   |  |  |
| Current M                                     | lailing Addres   | ss:  | New Mailing Address                         | New Mailing Address:                         |  |
|   | ANGE DRIVE   |  |   |  |  |
| #302<br>DAVIE, FL                             | 33330 US   |  |   |  |  |
| FEI Number:                                   | : 59-2742376   | FEI Number Applied For ( )                                 | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |  |  | Name and Address of                         | Name and Address of New Registered Agent:    |  |
| 3107 STÍR<br>FORT LAU<br>The above            | BERNARD A.<br>LING ROAD, :<br>JDERDALE, F<br>named entity<br>e of Florida. | L 33312 US   | e purpose of changing its registered        | l office or registered agent, or both,       |  |
| SIGNATU                                       |  | ois Ciameture of Degistered A                              |   | Dete   |  |
| Election Car                                  |  | nic Signature of Registered A g Trust Fund Contribution(). | geni  | Date   |  |
| OFFICERS AND DIRECTORS:                       |  |  | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | CARROLL, JAI   | E DRIVE, SUITE 302   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | KERR, RALPH  | E DRIVE, SUITE 302   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition                          |  |
| Title:  | D (  | ) Delete   | Title:                                      | ( ) Change ( ) Addition                      |  |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES S. CARROLL D 04/18/2006