2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# M47221

Title:

Name:

Address:

City-St-Zip:

FILED Sep 22, 2006 Secretary of State

Entity Nan	ne: JOKAYR	EALTY, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
771 S.W. S STUART, F	OUTH RIVER L 34997	DR. #104				
Current Mailing Address:				New Mailing Address:		
771 S.W. S STUART, F	OUTH RIVER L 34997	DR. #104				
FEI Number: 65-0092250		FEI Number Applied For ()	FEI Nur	mber Not Applicable ()		Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
GOLDEN, 771 S.W. S STUART, F	OUTH RIVER	DR. #104 IS				
The above in the State		submits this statement for the p	ourpose o	of changing i	ts registere	ed office or registered agent, or both,
SIGNATUR	RE: JOHN GO	DLDEN				
Electronic Signature of Registered Agent				Date		
Election Cam	npaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () SPERO, STEPH P O BOX 103 BRACKNEY, PA			Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	GOLDEN, JOHN 19TH OAK CRE	Delete N CHRISTO, PHER ST STATION, NY 11746		Title: Name: Address: City-St-Zip:	2 MANOR F	(X) Change () Addition JOHN CHRISTO, PHER ROAD NORTH WN, NY 11740
Title: Name: Address: City-St-Zip:	D () GOLDEN, PATR 750 SW CLAUD PORT ST LUCIE	DIA AVE		Title: Name: Address: City-St-Zip:	PO BOX 19	(X) Change () Addition PATRICIA ANN, 95 /ILLE, MD 21032

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHEN W. SPERO D 09/22/2006

(X) Delete

SPERO, RITA

BENNETT RD

ASHBY, MA

() Change () Addition