2007 FOR PROFIT CORPORATION

FILED Feb 22, 2007 08:00 AN Secretary of State **ANNUAL REPORT DOCUMENT # M71663** JFI REAL ESTATE CORPORATION Mailing Address Principal Place of Business **POST OFFICE BOX 428** 11505 HWY 574 P.O. BOX 428 MANGO, FL 33550 MANGO, FL 33550 01092007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-0828847 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARRETT, ROBERT R DO NOT WRITE 11505 E. BRAODWAY MANGO, FL 33550 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE GARRETT, ROBERT R NAME STREET ADDRESS 11505 HWY 574 CITY-ST-ZIP MANGO, FL 33550 U00000644641 TITLE 03/02/07-80051-017 150.00 NAME JAEB, STEPHEN L. STREET ADDRESS 1105 HWY 574 CCTY-ST-7IP MANGO, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes | 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 all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS