
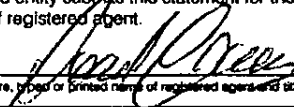
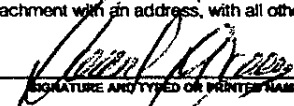


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2006 08:00 A
Secretary of State

DOCUMENT # N02000001823		
1. Entity Name JUST FOR JUST CAUSES INC.		
Principal Place of Business 9050 NW 10 PLACE PLANTATION, FL 33322 US		Mailing Address 9050 NW 10 PLACE PLANTATION, FL 33322 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CERISANO, LEONARD E 9050 NW 10 PLACE PLANTATION, FL 33322		DO NOT WRITE 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:  <small>Signature, typed or printed name of registered agent and title if applicable.</small> (NOTE: Registered Agent signature required when reinstating)		
Filing Fee Is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CERISANO, MARINA 9050 NW 10 PLACE PLANTATION, FL 33322	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CERISANO, LORENA 8 LARK TERRACE GOSHEN, NY 10924	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CERISANO, LEONARD E 9050 NW 10 PLACE PLANTATION, FL 33322	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 617, 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:  Leonard Cerisano 5-1-06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <small>Date</small> <small>Daytime Phone #</small>		



01112006 No Chg-NP CR2E037 (11/05)

4. FEI Number 07-1280578	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

U000000563447
05/20/06-80009-023 61.25

**DO NOT WRITE
IN THIS SPACE**