2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000679

Entity Name: JAMFEST, INC.

FILED Mar 24, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
7100 PINES BOULEVARD SUITE 26		7100 PINES BOULEVA SUITE 3	7100 PINES BOULEVARD	
PEMBROKE PINES, FL 33024			PEMBROKE PINES, FL 33024	
Current Mailing Address:		New Mailing Address	New Mailing Address:	
7100 PINES BOULEVARD SUITE 26 PEMBROKE PINES, FL 33024		SUITE 3	7100 PINES BOULEVARD SUITE 3 PEMBROKE PINES, FL 33024	
FEI Number	: FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
ROBERTS, RENEE 9740 MILL POND DRIVE MIRAMAR, FL 33025 US			ROBERTS, RENEE L P 9740 MILL POND DRIVE MIRAMAR, FL 33025 US	
	named entity submits this statement for the e of Florida.	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: RENEE ROBERTS			03/24/2006	
	Electronic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Delete ROBERTS, RENEE FOUNDER 9740 MILL POND DRIVE MIRAMAR, FL 33025	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete ROBERTS, CAL FOUNDER 9740 MILL POND DRIVE MIRAMAR, FL 33025	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete GUYAH, KAHILAH 4208 SW 87TH TERRACE DAVIE, FL 33328	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete HAGLEY, ARLENE 11216 SW 12TH STREET APT. 102 PEMBROKE PINES, FL 33025	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () Delete SMITH, WENDY COORDIN	Title: Name:	() 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RENEE ROBERTS P 03/24/2006

1731 SW 86TH AVENUE

MIRAMAR, FL 33025

Address: City-St-Zip: