

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000679

FILED  
Sep 06, 2007  
Secretary of State

Entity Name: JAMFEST, INC.

## Current Principal Place of Business:

7100 PINES BOULEVARD  
SUITE 3  
PEMBROKE PINES, FL 33024

## New Principal Place of Business:

13099 SW 21 STREET  
MIRAMAR, FL 33027

## Current Mailing Address:

7100 PINES BOULEVARD  
SUITE 3  
PEMBROKE PINES, FL 33024

## New Mailing Address:

13099 SW 21 STREET  
MIRAMAR, FL 33027

FEI Number: 74-3173745      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

ROBERTS, RENEE L P  
9740 MILL POND DRIVE  
MIRAMAR, FL 33025      US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: ROBERTS, RENEE FOUNDER  
Address: 9740 MILL POND DRIVE  
City-St-Zip: MIRAMAR, FL 33025

Title: D      ( ) Delete  
Name: ROBERTS, CAL FOUNDER  
Address: 9740 MILL POND DRIVE  
City-St-Zip: MIRAMAR, FL 33025

Title: S      ( ) Delete  
Name: GUYAH, KAHILAH  
Address: 4208 SW 87TH TERRACE  
City-St-Zip: DAVIE, FL 33328

Title: T      ( ) Delete  
Name: HAGLEY, ARLENE  
Address: 11216 SW 12TH STREET APT. 102  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D      ( ) Delete  
Name: SMITH, WENDY COORDIN  
Address: 1731 SW 86TH AVENUE  
City-St-Zip: MIRAMAR, FL 33025

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S      (X) Change ( ) Addition  
Name: GUYAH, KAHILAH  
Address: 13405 SW 32 STREET  
City-St-Zip: MIRAMAR, FL 33027

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: RENEE ROBERTS

P

09/06/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date