

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 26, 2007
Secretary of State

DOCUMENT# N94000004889

Entity Name: JASMINE LAKES CLUB, INC.**Current Principal Place of Business:**4701 S.W. 62ND AVE.
DAVIE, FL 33314**New Principal Place of Business:**4701 S.W. 62ND AVE.
DAVIE, FL 33314 FL**Current Mailing Address:**4701 S.W. 62ND AVE.
DAVIE, FL 33314**New Mailing Address:**4701 S.W. 62ND AVE.
DAVIE, FL 33314 FL**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROBERT KAYE & ASSOCIATES, P.A.
6261 N.W. 6TH WAY
SUITE 103
FORT LAUDERDALE, FL 33309 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: PD () Delete
Name: RAGOONAN, SHARON
Address: 4701 S.W. 62ND AVE.
City-St-Zip: DAVIE, FL 33314Title: DV () Delete
Name: JANKOWSKI, RONALD
Address: 4701 S.W. 62ND AVE.
City-St-Zip: DAVIE, FL 33314Title: TD () Delete
Name: GARCIA, JOHN
Address: 4701 S.W. 62ND AVE.
City-St-Zip: DAVIE, FL 33314**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DST (X) Change () Addition
Name: RAGOONAN, SHARON
Address: 4701 S.W. 62ND AVE.
City-St-Zip: DAVIE, FL 33314 USTitle: DP (X) Change () Addition
Name: LEVIN, ZVI
Address: 4701 S.W. 62ND AVE.
City-St-Zip: DAVIE, FL 33314 USTitle: DVP (X) Change () Addition
Name: EVENTAL, MORDECHAY
Address: 4701 S.W. 62ND AVE.
City-St-Zip: DAVIE, FL 33314 US

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: ZVI LEVIN, PRESIDENT

P

10/26/2007

Electronic Signature of Signing Officer or Director

Date