## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000004677

IBARRA, BARBARA A

MIAMI, FL 33156

11035 KILLIAN PARK RD

Name:

Address:

City-St-Zip:

FILED Feb 27, 2006 Secretary of State

Entity Nar	ne: JUNGLE	E HABITAT, INC.		•	
Current Principal Place of Business:			New Principal Place o	of Business:	
	CONUT LANE ACH, FL 331				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	CONUT LANE ACH, FL 331				
FEI Number:	77-0004677	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
LEVINE, M 266 S CO MIAMI, FL	CONUT LAN				
The above in the State	named entity of Florida.	v submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Ager			ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MEYERS, MA	CHUSETT AVE NW	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DST ( LEVINE, MAR 266 S. COCO MIAMI, FL 33	NUT LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DVP ( TODD, LESLI 14545 SW 84 MIAMI, FL 33	TH AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	DP (	) Delete	Title:	( ) 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARY H LEVINE DST 02/27/2006