


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 10, 2007 8:00 am**  
**Secretary of State**

01-10-2007 90050 012 \*\*\*150.00

DOCUMENT # P0000000762  
1. Entity Name  
JEDNASZEWSKI, INC.



Principal Place of Business Mailing Address  
1575 OWLS RETREAT 1575 OWLS RETREAT  
TARPON SPRINGS, FL 34688 TARPON SPRINGS, FL 34688

2. Principal Place of Business - No P.O. Box # 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
Zip Country Zip Country

01062007 Chg-P CR2E034 (12/06)



4. FEI Number 59-3619154 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
JEDNASZEWSKI, TERENCE B  
1575 OWLS RETREAT  
TARPON SPRINGS, FL 34688

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS  
TITLE D Delete  
NAME JEDNASZEWSKI, TERENCE B  
STREET ADDRESS 1575 OWLS RETREAT  
CITY-ST-ZIP TARPON SPRINGS, FL 34688

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  
TITLE Change Addition  
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 607, 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: TERRENCE B. JEDNASZEWSKI  
T. Jednaszewski  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 6 JAN 2007 727-937-1526 Daytime Phone #