2004 FOR PROFIT CORPORATION

ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000005991

1. Entity Name JADÁ INVESTMENTS, INC.



Principal Place of Business

751 PARK OF COMMERCE DR., SUITE 128 BOCA RATON, FL 33487

Mailing Address

751 PARK OF COMMERCE DR., SUITE 128 BOCA RATON, FL 33487

FILED Mar 26, 2004 08:00 AM Secretary of State



01122004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0993214 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLMAN, NANCY B ESQ. DREIER BARITZ & COLMAN 150 EAST PALMETTO PARK ROAD, SUITE 750

DO NOT WRITE

BOCA RATON, FL 33432			IN THIS SPACE			
8. The above the obligat	named entity submits this statement for the plons of registered agent.	ourpose of changing its registere	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	Il applicable (NOTE Registeres	d Agent signature	a required when reinstating)	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Bar Trust Fund Contribution. Added to Fees		\$5.00 May Ba Added to Fees	U00000097254 - 03/26/04-80032-020 158 75	
TO.	OFFICERS AND DIREC	CTORS				
NAME	PECHTER, MARTIN					
STREET ADDRESS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
CITY-ST-ZIP	BOCA RATON, FL 33487					
TITLE	VP					
NAME	PECHTER, JEFFREY					
STREET ADDRESS	5 751 PARK OF COMMERCE DRIVE, #128					
City-\$1-ZIP	BOCA RATON, FL 33487					
TIFLE	ST		1			
NAME	BLOCK, STEPHEN					
STREET ADDRESS				DO NOT WRITE		
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TITLE NAME						

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

ED NAME OF SIGNING OFFICER OR BIRECTOR