

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000016738

Entity Name: JAS OPERATIONS, INC.

FILED
Jan 03, 2005
Secretary of State

Current Principal Place of Business:

611 WEST AZEELE STREET
TAMPA, FL 33606

New Principal Place of Business:

2401 S. FLORIDA AVE
LAKELAND, FL 33803

Current Mailing Address:

611 WEST AZEELE STREET
TAMPA, FL 33606

New Mailing Address:

2401 S. FLORIDA AVE
LAKELAND, FL 33803

FEI Number: 59-3750785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RON, JOBLOM S
219 S. HALE AVE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

RON, SJOBLUM
4205 W. AZEELE
TAMPA, FL 33609 US

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: RON SJOBLUM

01/03/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RON, JOBLOM S
Address: 219 S. HALE AVE
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RON, SJOBLUM
Address: 4205 W. AZEELE
City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RON SJOBLUM

P

01/03/2005

Electronic Signature of Signing Officer or Director

Date