

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State



DOCUMENT # P00000062926

1. Entity Name
JAG HOLDINGS AND INVESTMENTS, INC.

Principal Place of Business
14820 NE 5TH AVENUE
MIAMI, FL 33161

Mailing Address
14820 NE 5TH AVENUE
MIAMI, FL 33161



04172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-1022495** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

JOSEPH, ARNOLD
14820 NE 5TH AVENUE
MIAMI, FL 33161

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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

Joseph Arnold Director *4/20/06*

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, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE **DP**
 NAME **JOSEPH, ARNOLD**
 STREET ADDRESS **14820 NE 5TH AVENUE**
 CITY-ST-ZIP **MIAMI, FL 33161**

TITLE **D**
 NAME **JOSEPH, MARIE GUETIE**
 STREET ADDRESS **14820 NE 5TH AVENUE**
 CITY-ST-ZIP **MIAMI, FL 33161**

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 05/10/06-80090-006 150.00

DO NOT WRITE IN THIS SPACE

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 trustee 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:

Joseph Arnold Director *4/20/06*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305 761 362