2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068582

Entity Name: JCG TECHNOLOGIES INC

704 WINDSOR RIDGE DR.

WEST BOROUGH, MA 01581

Address:

City-St-Zip:

FILED Feb 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 50 S BELCHER RD, STE 104 CLEARWATER, FL 33765 **Current Mailing Address: New Mailing Address:** 50 S BELCHER RD, STE 104 CLEARWATER, FL 33765 US FEI Number: 59-3661721 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GUTHIKONDA, SRINIVAS 2615 W GRAND RESERVE CIR **APT 323** CLEARWATER, FL 33759 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition GUTHIKONDA, SRINIVAS Name: Name: 2615 W GRAND RESERVE CIR APT 323 Address: Address: City-St-Zip: CLEARWATER, FL 33759 US City-St-Zip: () Delete Title: VΡ Title: () Change () Addition Name: GUMMADI, JANAKI Name: 2615 W GRAND RESERVE CIR APT 323 Address: Address: CLEARWATER, FL 33759 US City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition VALLIPALLI, SASIKANTH Name: VALLIPALLI, SASIKANTH Name:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

6 EMERSON CIRCLE

SHREWSBURY, MA 01545

SIGNATURE: SRINIVAS GUTHIKONDA PS 02/03/2007