2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000099094

Entity Name: JAZZPER CAPITAL, INC.

FILED Mar 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8099 PALOMINO DRIVE NAPLES, FL 34113 **Current Mailing Address: New Mailing Address:** 8099 PALOMINO DRIVE NAPLES, FL 34113 FEI Number: 59-3679377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NOVATT, JEFF M ESQ 821 FIFTH AVENUE SOUTH SUITE 201 NAPLES, FL 34102 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 Title: (X) Change () Addition PERKINS, JOHN H PERKINS, JOHN H Name: Name: 20940 ISLAND SOUND CIRCLE STE 203 22 RIVERBANK DRIVE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: TORONTO, ON M9A1J4 CA Title: VD Title: () Delete () Change () Addition Name: SOLOMON, A J Name: 3185 HORSESHOE DRIVE Address: Address: NAPLES, FL 34104 City-St-Zip: City-St-Zip: Title: Title: STD () Delete () Change () Addition BENNETT, DAVID C Name: Name: 8099 PALOMINO DRIVE Address: Address: City-St-Zip: NAPLES, FL 34113 City-St-Zip:

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: JOHN H. PERKINS PD 03/28/2005