2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000023901

Name:

Address:

City-St-Zip:

GALLUCCI, JOSEPH

SUNRISE, FL 33351

9166 NORTHWEST 49TH COURT

Entity Name: JACOBS & GALLUCCI, INC.

FILED Jan 10, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9166 NW 49TH STREET 9166 NW 49TH COURT SUNRISE, FL 33351 SUNRISE, FL 33351 **Current Mailing Address: New Mailing Address:** 9166 NW 49TH CT. SUNRISE, FL 33351 US FEI Number: 65-1081773 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: JACOBS, MARC JACOBS, MARC PRES. 9166 NORTHWEST 49TH COURT 9166 NORTHWEST 49TH COURT SUNRISE, FL 33351 SUNRISE, FL 33351 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: MARC JACOBS 01/10/2006 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 JACOBS, MARC Name: Name: 9166 NORTHWEST 49TH COURT Address: Address: City-St-Zip: SUNRISE, FL 33351 US City-St-Zip: Title: STVD () Delete Title: () Change () Addition

Name:

Address:

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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.

SIGNATURE: MARC JACOBS PRES 01/10/2006