2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 28, 2005 08:00 AM Secretary of State DOCUMENT # P01000029822 1. Entity Name J. L. GARRETT INCORPORATED 17 . Fat Place of Business Mailing Address 10530 TO ATH AVE NORTH STE 1000 10539 114TH AVE NORTH STE 1000 LARGO, FL 33773 LARGO, FL 33773 No Chg-P CR2E034 (10/03) 01222005 DC NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3690240 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARRETT, JEFF DO NOT WRITE 10539 114TH AVE NORTH STE 1000 LARGO, FL 33773 IN THIS SPACE 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 Signature, typed or primed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME GARRETT, JEFFREY L 10539 114TH AVE N STREET ADDRESS. LARGO, FL 33773 CITY-ST-ZIP =U00000338260 TITLE NAME 04/28/05-80028-020 150.nn STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STRUCT ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FICER OR DIRECTOR

FILED