

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051972

Entity Name: JASU INC.

FILED  
Apr 18, 2006  
Secretary of State

## Current Principal Place of Business:

211 HUNT ST  
CLERMONT, FL 34711

## New Principal Place of Business:

2957 MAGNOLIA BLOSSOM CIRCLE  
CLERMONT, FL 34711 US

## Current Mailing Address:

PO BOX 714  
GROVELAND, FL 34736

## New Mailing Address:

PO BOX 430  
MINNEOLA, FL 34755 US

FEI Number: 01-0603827

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEIVA, JAIME E  
211 HUNT ST  
CLERMONT, FL 34711 US

## Name and Address of New Registered Agent:

LEIVA, JAIME A  
2957 MAGNOLIA BLOSSOM CIRCLE  
CLERMONT, FL 34711 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: JAIME A LEIVA

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: LEIVA, JAIME A  
Address: 211 HUNT ST  
City-St-Zip: CLERMONT, FL 34711

Title: VPS ( ) Delete  
Name: LEIVA, SUSAN M  
Address: 211 HUNT ST  
City-St-Zip: CLERMONT, FL 34711

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LEIVA, JAIME A  
Address: 2957 MAGNOLIA BLOSSOM CIRCLE  
City-St-Zip: CLERMONT, FL 34711 US

Title: VP (X) Change ( ) Addition  
Name: LEIVA, SUSAN M  
Address: 2957 MAGNOLIA BLOSSOM CIRCLE  
City-St-Zip: CLERMONT, FL 34711 US

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: JAIME A LEIVA

P

04/18/2006

Electronic Signature of Signing Officer or Director

Date