

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064718

Entity Name: JORU, INC.

FILED
May 02, 2005
Secretary of State

Current Principal Place of Business:

6240 SOUTH TAMIAMI TRAIL
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

6240 SOUTH TAMIAMI TRIAL
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 65-1116941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSMITH, STANLEY A
1605 MAIN STREET
SUITE 1001
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DPAS () Delete
Name: BOLOGNESE, JOSEPH
Address: 1605 MAIN STREET SUITE 1001
City-St-Zip: SARASOTA, FL 34236

Title: T () Delete
Name: BOLOGNESE, JOSEPH
Address: 1605 MAIN STREET SUITE 1001
City-St-Zip: SARASOTA, FL 34236

Title: DVPS () Delete
Name: ORANGIAS, RITA
Address: 1605 MAIN ST, STE 1001
City-St-Zip: SARASOTA, FL 34236

Title: AT () Delete
Name: ORANGIAS, RITA
Address: 1605 MAIN ST, STE 1001
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JOSEPH BOLOGNESE

T

05/02/2005

Electronic Signature of Signing Officer or Director

Date