


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90299 033 ***150.00

DOCUMENT # P01000068979 1. Entity Name JAF TECHNOLOGIES, INC.			
Principal Place of Business 473 MOHAVE TERRACE LAKE MARY, FL 32746		Mailing Address #230, 4044 W. LAKE MARY BLVD. UNIT 104 LAKE MARY, FL 32746	
2. Principal Place of Business 1700 Fountainhead Drive Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State Lake Mary FL		City & State	
Zip 32746		Country Seminole	
4. FEI Number 59-3732833		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERRELL, JAMES A 473 MOHAVE TERRACE LAKE MARY, FL 32746		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FERRELL, JAMES A 473 MOHAVE TERRACE LAKE MARY, FL 32746 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.			
SIGNATURE: James Ferrell <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 5/1/2006 Daytime Phone # 407 342 6642	

ATTACHMENT 40087985
P01000068979

File: D:\UltraEditWorking\DeptOfState 5/2/2006, 8:34:16PM

5/2/2006

Please find the enclosed annual report.

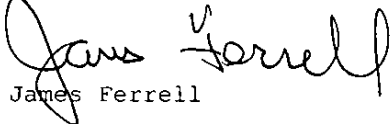
Please note that as per the notification card you sent me, I attempted multiple times to file online on 5/1/2006 and your system was down. I kept getting a CGI timeout error.

I tried today and you fixed the system but it tried to charge me an extra \$400.

Consequently, I am sending this in via mail and with \$150 because your system was down and not operational.

If this issue needs further discussion, please call me at 407-342-6642.

Regards,


James Ferrell