2007 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2007 08:00 AM Secretary of State **DOCUMENT # P01000083112** 1. Entity Name JARBERTH, INC. Principal Place of Business Mailing Address 13200 EMERALD COAST 13200 EMERALD COAST APT. 202 APT. 202 ORLANDO, FL 32824 ORLANDO, FL 32824 04302007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 59-3742302 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ARIAS, JORGE I DO NOT WRITE 13200 EMERALD COAST APT. 202 IN THIS SPACE ORLANDO, FL 32824 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. 1 am familiar with, and accept the obligations of registered agent. Signature, typed or printed 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, 2007 Fee will be \$550.00 \Box Trust Fund Contribution. OFFICERS AND DIRECTORS 10. DP TITLE ARIAS, JORGE I NAME 13200 EMERALD COAST SUITE 202 STREET ADDRESS U00000759298 CITY-ST-ZIP ORLANDO, FL 32824 TITLE ARIAS, BERTHA C NAME STREET ADDRESS 13200 EMERALD COAST SUITE 202 CITY-ST-ZIP ORLANDO, FL 32824 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

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:

NAME STREET ADDRESS CITY-ST-ZIP

Seethy C. Areas

04-30-07

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