

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000092870

Entity Name: JPJ TECHNOLOGIES INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

700 NW 57TH PLACE
SUITE 3-A
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

700 NW 57TH PLACE
SUITE 3-A
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-1145525 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GAYLORD, JINES
700 NW 57TH PLACE
SUITE 3-A
FT LAUDERDALE, FL 33309 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COOPER, JASON
Address: 100 SUNRISE APT 621
City-St-Zip: PALM BEACH, FL 334803902

Title: DP () Delete
Name: JINES, GAYLORD
Address: 700 NW 57TH PLACE
City-St-Zip: FT LAUDERDALE, FL 33309

Title: S () Delete
Name: RESPET, JAMES
Address: 117 LAKE EMERALD DRIVE #401
City-St-Zip: FT LAUDERDALE, FL 33309

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:

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: GAYLORD JINES

DP

04/29/2005

Electronic Signature of Signing Officer or Director

Date