


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000097542 1. Entity Name JERA SERVICES INC.		
Principal Place of Business 102 NE 2ND STREET SUITE 349 BOCA RATON, FL 33432	Mailing Address 102 NE 2ND STREET SUITE 349 BOCA RATON, FL 33432	
<h2>DO NOT WRITE IN THIS SPACE</h2>		
6. Name and Address of Current Registered Agent FARKAS, ANNE 7867 LA MIRADA DR. BOCA RATON, FL 33433-6143		<h2>DO NOT WRITE IN THIS SPACE</h2>
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 not stating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000408927 02/08/06-80076-023 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DP FARKAS, GEORGE 7867 LA MIRADA DR. BOCA RATON, FL 334336143	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DST FARKAS, ANNE 7867 LA MIRADA DR. BOCA RATON, FL 334336143	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<h2>DO NOT WRITE IN THIS SPACE</h2>	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP		
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: <u><i>Anne Farkas</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		1/26/06 Date
		(561) 302 32 37 Daytime Phone #



01262006 No Chg-P CR2E034 (11/05)

4. FCI Number 65-1144211	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	