2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105679

Entity Name: JA ENTERPRISES, INC

FILED May 22, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

1419 WEST WATERS AVE. 10014 NORTH DALE MABRY HWY #102 1/2

#101

TAMPA, FL 33604 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

1419 WEST WATERS AVE. 10014 NORTH DALE MABRY HWY

#102 1/2 #101 TAMPA, FL 33604 TAMPA, FL 33618

FEI Number: 01-0584972 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JENKINS, JOSEPH A JENKINS, JOSEPH A 1419 WEST WATERS AVE. 27552 BREAKERS DRIVE

TAMPA, FL 33604 US WESLEY CHAPEL, FL 33543

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: 05/22/2006

> 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: (X) Change () Addition () Delete Title:

JOSEPH, JENKINS A JOSEPH, JENKINS A Name: Name: 1419 WEST WATERS AVE. 10014 NORTH DALE MABRY HWY Address: Address:

City-St-Zip: TAMPA, FL 33604 City-St-Zip: TAMPA, FL 33618

Title: DV Title: (X) Change () Addition () Delete JENKINS-BROWN, FREDDIE M Name: BROWN, JOHNATHAN Name: 1419 WEST WATERS AVE. 10014 NORTH DALE MABRY HWY Address: Address:

TAMPA, FL 33604 TAMPA, FL 33618 City-St-Zip: City-St-Zip:

Title: Title: () Change () Addition (X) Delete

JENKINS-BROWN, FREDDIE M Name: Name: 1419 WEST WATERS AVE. Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 ALEXANDER JENKINS DP 05/22/2006