## 2007 FOR PROFIT CORPORATION

## Apr 23, 2007 8:00 am Secretary of State **ANNUAL REPORT** 04-23-2007 90061 013 \*\*\*150.00 DOCUMENT # P01000117846 JJ & A CONTRACTING INC. 40074214 Principal Place of Business Mailing Address 7609 NW 99TH AVE. 7609 NW 99TH AVE. TAMARAC, FL 33321 TAMARAC, FL 33321 04112007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 01-0556466 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CAMACHO, ANGELA M DO NOT WRITE 7609 NW 99TH AVE. TAMARAC, FL 33321 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME CAMACHO, ANGELA M 7609 NW 99TH AVE. STREET ADDRESS CITY-ST-ZIP TAMARAC, FL 33321 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TATLE NAME STREET ADDRESS CITY-ST-ZIP

n this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 dwered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied w indicated on this report or supplemental report of the corporation or the receiver or trustee ento changed, or on an attachment with an addre th all other like empowered.

SIGNATURE: \_

SIGNATURE

TITLE NAME STREET ADDRESS CITY-S1-ZIP JITLE NAME STREET ADDRESS CITY-ST-ZIP

OF SIGNING OFFICER OR DIRECTOR

FILED