

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000002261

Entity Name: JAX INNS, INC.

FILED
Jan 05, 2006
Secretary of State

Current Principal Place of Business:

300 PARK AVENUE
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

28630 SOUTHFIELD RD STE 230
LATHRUP VILLAGE, MI 48076

New Mailing Address:

FEI Number: 01-0552689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PATEL, VIJAY
8016 ARLINGTON EXPRESSWAY
JACKSONVILLE, FL 32211 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: P () Delete
Name: PATEL, JITENDRA B
Address: 28630 SOUTHFIELD RD STE 230
City-St-Zip: LATHRUP VILLAGE, MI 48076

Title: VP () Delete
Name: PATEL, VIJAY
Address: 8016 ARLINGTON EXP
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PATEL, JITENDRA B
Address: 28630 SOUTHFIELD RD STE 230
City-St-Zip: LATHRUP VILLAGE, MI 48076

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 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: JITENDRA B. PATEL

PRES

01/05/2006

Electronic Signature of Signing Officer or Director

Date