

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055308

Entity Name: JB MELG ENTERPRISES, INC.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

4563 NW 60 STREET
COCONUT CREEK, FL 33073

New Principal Place of Business:

SW MONTERREY LN
2531
PORT ST LUCIE, FL 34953

Current Mailing Address:

4563 NW 60 STREET
COCONUT CREEK, FL 33073

New Mailing Address:

SW MONTERREY LN
2531
PORT ST LUCIE, FL 34953

FEI Number: 04-3664344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DA SILVA MELGUEIRO, JOAO BOSCO
4563 NW 60 STREET
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

DA SILVA MELGUEIRO, JOAO BOSCO
SW MONTERREY LN
2531
PORT ST LUCIE, FL 34953 US

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:

04/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BOSCO DA SILVA, JOAO
Address: 4563 NW 60 STREET
City-St-Zip: COCONUT CREEK, FL 33073

Title: VTD () Delete
Name: DE ALBUQUERQUE, DENISE
Address: 4563 NW 60 STREET
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: BOSCO DA SILVA, JOAO
Address: 2531 SW MONTERREY LN
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VTD (X) Change () Addition
Name: DE ALBUQUERQUE, DENISE
Address: 2531 SW MONTERREY LN
City-St-Zip: PORT ST LUCIE, FL 34953

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: JOAO B. MELGUEIRO

PSD

04/26/2006

Electronic Signature of Signing Officer or Director

Date