2008 FOR PROFIT CORPORATION **ANNUAL REPORT** FILED Apr 07, 2008 08:00 A Secretary of State **DOCUMENT # P02000058556** J & S GULF COAST ENTERPRISES, INC. Principal Place of Business Mailing Address 401 MARY ESTHER BLVD. 401 MARY ESTHER BLVD. SUITE B SUITE B MARY ESTHER, FL 32569 MARY ESTHER, FL 32569 01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 02-0608987 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent XUEREB, JOSEPH C JR. DO NOT WRITE 401 MARY ESTHER BLVD. **SUITE B** IN THIS SPACE MARY ESTHER, FL 32569 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) HAAAAARRI EGG 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 n4/16/08-80012-803 150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME XUEREB, JOSEPH C JR. STREET ADORESS 401 MARY ESTHER BLVD, SUITE B CITY-ST-ZIP MARY ESTHER, FL 32569 TITLE

NAME **XUEREB, SHANNON P** 401 MARY ESTHER BLVD., SUITE B STREET ADDRESS CITY-ST-ZIP MARY ESTHER, FL 32569 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

Shannon

Xuereb

4-4-08

Daytime Phone 4