FOR PROFIT CORPORATION ANNUAL REPORT

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1. Entity Nar	we MAINTIALI	# 1020C	0060191		P			1	to be to
JEP VENTURES, INC.						11 MAY 16 PM 4: 37			
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		ness - No P.O. Box#	3. Mailing Address	<u>, </u>	of the contraction				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CR2E034B (1/11)			
City & State Lake Park			City & State La Ve Pin K			4. FEI Nur			
Zip 35	2403	Country U.S	^{Zip} 33403	Country	 '25	i	300077		\$8.75 Additional Fee Required
β.,		A STATE OF THE STA				7. Name and	d Address of Curre	nt Register	ed Agent
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the obligati	i named entity ions of registe	r submits this statement for ered agent.	the purpose of changing its	registered offic	e or registered	d agent, or bo	th, in the State of Fig	orida, I am f	amiliar with, and accept
SIGNATURE.	Signapore, typed of	or priviled name of registered agent an	d title if applicable (NOT	E Registered Agent :	agnature required w	hen re instating		4/30	2011
January 1 May 1 Fee is \$150.00 After May 1 Fee is \$550.00 Amended AR is \$61.25 Make Check Payable to Florida Department of State						O May Be I to Fees E-mail address to be used for future annual report notices			
10.		OFFICERS AND I			-346	N	100	The second secon	Mily Contract Carry March
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jerry 9498 Lake	PiHMan Altonate AIA Park, FL 3.	3 4/03			057	10020 79212-71		2750 04 **150,00
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CITY-ST-ZIP	*								

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 on an attachment with an address, with all other like empowered. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.195 F.S.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR