2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Mar 09, 2007 8:00 am DOCUMENT # P02000061706 **Secretary of State** 03-09-2007 90004 007 ***158.75 JADE COLLECTION, INC. Principal Place of Business Mailing Address 2400 E. COMMERCIAL BLVD. 2400 E. COMMERCIAL BLVD. SUITE 500 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 11-3719072 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NEWMAN, IRWIN J Street Address (P.O. Box Number is Not Acceptable) 2400 E. COMMERCIAL BLVD. SUITE 500 FT. LAUDERDALE FL 33308 City Zip Code 8. The above named ontity 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete Addition Chairman TITLE THE ☐ Change IRVIN Freedman KLEIN, GERARD I NAME 2400 E COMMERCIAL Blid Suite 500 2400 E. COMMERCIAL BLVD., SUITÉ 500 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33308 Et. Lauderdale, Fl. 33308 CHY SI ZIP CHY SI ZIP DP ши VICE CHAIRMAN Addition Delete NEWMAN, IRWIN J STEVEN B. Freedmind NAMI 2400 E. Commercial Blud Suite 500 2400 E. COMMERCIAL BLVD., SUITE 500 STREET ADDRESS STREET ADDRESS. FT. LAUDERDALE FL 33308 CITY ST-ZIP CHY-ST 7IP Ft. LANderdale, Fl. 33308 TITLE Delete HILE ☐ Change Addition GIBBS, DONALD R NAME NAMI 2400 E. COMMERCIAL BLVD., SUITE 500 STREET ADDRESS STREET ADDRESS CITY - SE-ZIP FT. LAUDERDALE FL 33308 CITY ST ZIP ☐ Delete ☐ Addition ☐ Change NAME STREET ADDRESS STREET ADDRESS CJIY SI-74P CITY - ST - ZIP TITEE Delete THE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY ST-ZIP ☐ Delete HDF ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-S1-ZIP CHY-SI-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplicational report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or truetee 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.

RWIN J. NEWMAN

FILED