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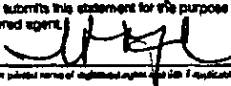
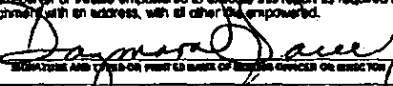
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

90139154

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # P02000065848</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                   |
| 1. Entity Name<br><b>JENDEY ENTERPRISES, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                   |
| Principal Place of Business<br><b>280 NW 47TH STREET<br/>FORT LAUDERDALE, FL 33309</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                   |
| Mailing Address<br><b>280 NW 47TH STREET<br/>FORT LAUDERDALE, FL 33309</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                   |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 3. Mailing Address                                                |
| State, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | State, Apt. #, etc.                                               |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | City & State                                                      |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Country                                                           |
| 4. FEI Number<br><b>820548481</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Applied For<br>Not Applicable                                     |
| 5. Certificate of Status Desired <input type="checkbox"/> \$3.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                   |
| 6. Name and Address of Current Registered Agent<br><b>NOFL INVESTMENTS, INC.<br/>2011 SOUTH PERIMETER ROAD<br/>SUITE C<br/>FORT LAUDERDALE, FL 33309</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                   |
| 7. Name and Address of New Registered Agent<br><b>NOFL INVESTMENTS, INC.<br/>Street Address (P.O. Box Number is Not Acceptable)<br/><b>5514 NW 23 AVE, HONOLULU<br/>FL 33309</b></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                   |
| 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  <b>6/6/03</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                   |
| 9. Election Campaign Finance<br>Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                    |
| <b>CEO<br/>SANCHEZ, NELSON<br/>280 NW 47TH STREET<br/>FORT LAUDERDALE, FL 33309</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                   |
| <b>VTO<br/>SANCHEZ, DAGMARA<br/>280 NW 47TH STREET<br/>FORT LAUDERDALE, FL 33309</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Delete                                   |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Delete                                   |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Delete                                   |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Delete                                   |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Delete                                   |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Delete                                   |
| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                    |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>---</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(5)(b), 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, its manager 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 persons empowered. |                                                                   |
| SIGNATURE:  <b>6/6/03</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                   |

\* AFTER COMMUNICATING W/ YOUR OFFICE WE WERE  
TOLD TO OBTAIN THIS FORM FROM THE INTERNET  
& MAIL IN W/ \$150.-. " THANK YOU.

per conversation on 6/19/03 the corporation  
was notified 2/11/03

TS