2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067046

Entity Name: JOBKITE, INC.

FILED Jun 04, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1601 PENF 750-110 ROCHESTE	IELD RD ER, NY 14625	US		3349 MONF SUITE 111 ROCHESTE	ROE AVE ER, NY 14618	US
Current Mailing Address:				New Mailing Address:		
1601 PENF 750-110 ROCHESTE	IELD RD ER, NY 14625	US		3349 MONF SUITE 111 ROCHESTE	ROE AVE ER, NY 14618	US
FEI Number:	42-1540319	FEI Number Applied For ()	FEI Num	ber Not Appli	cable () C	ertificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
BUSINESS FILINGS INCORPORATED 1203 GOVERNERS SQUARE BLVD STE 101 TALLAHASSEE, FL 323012960 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.						
SIGNATUR	E:					
	Electronic	Signature of Registered Agent				Date
Election Cam		2)(b), F.S., the corporation did not re rust Fund Contribution (). DRS:		-		O OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	PD () D GALLER, HEATHI 31 FAIR OAKS DI EAST ROCHESTE	ER R		Title: Name: Address: City-St-Zip:	() CI	nange()Addition
Title: Name: Address: City-St-Zip:	SD () D JAMES, LINDA 23 FAIR OAKS DE EAST ROCHESTE	₹		Title: Name: Address: City-St-Zip:	() Cł	nange()Addition
Title: Name: Address: City-St-Zip:	VD () D GLASGOW, SCO 30 WESTWOOD EAST ROCHESTE	TT DR		Title: Name: Address: City-St-Zip:	VD (X) CI GLASGOW, SCOT 29 RIDGEVIEW D EAST ROCHESTE	R
Title: Name: Address: City-St-Zip:	T () D GLASGOW, WEN 30 WESTWOOD EAST ROCHESTE	DY DR		Title: Name: Address: City-St-Zip:	T (X) CI GLASGOW, WENI 29 RIDGEVIEW D EAST ROCHESTE	DY R
Title: Name: Address: City-St-Zip:	D () D GALLER, MICHAE 31 FAIR OAKS DE EAST ROCHESTE	EL R		Title: Name: Address: City-St-Zip:	() Cł	nange()Addition
Title: Name: Address: City-St-Zip:	D (X) D HART, EVAN P 6 LLOWICK CT PALM COAST, FL	elete . 32164 US		Title: Name: Address: City-St-Zip:	() CI	nange()Addition

I hereby certify that the information supplied with this filing does not qualify 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: WENDY GLASGOW T 06/04/2008