


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

|   |  |   |
|---|--|---|
| DOCUMENT # P02000075716                                 |  |  |
| 1. Entity Name<br>MICHELLE & JENNIFER ENTERPRISES, INC. |  |   |

|  |   |
|--|---|
| Principal Place of Business<br>7205 EAST 55 AVE<br>BRADENTON, FL 34203 | Mailing Address<br>35184 US 19 N<br>PALM HARBOR, FL 34684 |
|--|---|

|                                |         |                     |         |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business |         | 3. Mailing Address  |         |
| Suite, Apt. #, etc.            |         | Suite, Apt. #, etc. |         |
| City & State                   |         | City & State        |         |
| Zip                            | Country | Zip                 | Country |

|   |  |
|---|--|
| 6. Name and Address of Current Registered Agent         |  |
| JALLO, PAUL<br>4313 AUSTIN WAY<br>PALM HARBOR, FL 34685 |  |

FILED  
05 MAY 10 PM 4:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04252005 Chg-P CR2E034 (10/03)

|  |  |
|--|--|
| 4. FEI Number<br>54-2062784  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |  |

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 _____ | DATE _____ |
|-----------------|------------|

|   |   |
|---|---|
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

|  |   |   |  |
|--|---|---|--|
| 10. OFFICERS AND DIRECTORS                       |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | P<br>JALLO, PAUL<br>12402 PLANTATION LN #205<br>TAMPA, FL 33635 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | P<br>Jallo, Paul<br>290 Tall Oak Trail<br>Tallahassee, FL 34688 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | 500054749575<br>05/18/05--01062--003 **1550.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY- ST- ZIP      | <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 119.07(3)(i), 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: <u>Paul Jallo</u> | Date: <u>4.29-</u> |
|------------------------------|--------------------|