## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000080093

PORT ST. LUCIE, FL 34986

City-St-Zip:

FILED Apr 06, 2004 Secretary of State

Entity Nar	ne: J&LINF	FORMATION TECHNOL	.OGIES, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
	FOGEL CT. LUCIE, FL 3	4986					
Current Mailing Address:				New Mailing Address:			
	FOGEL CT. LUCIE, FL 3-	4986					
FEI Number: 02-0633506 FEI Number Applied For ( ) FEI N				mber Not App	licable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Ag	ent:	Name and	Addres	s of New Registered Agent:	
PORT ST. The above	FOGEL CT. LUCIE, FL 34		or the purpose o	of changing i	ts registe	ered office or registered agent, or both,	
SIGNATUR	RE:						
		nic Signature of Registe	ŭ			Date	
Election Car	npaign Financir	g Trust Fund Contribution	( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD ( GOMEZ, LUIS 5852 NW FOG PORT ST. LUC	EL CT.		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	VD ( GOMEZ, JOVA 5852 NW FOG			Title: Name: Address:	,	(X) Change ( ) Addition JOVANA V FOGEL CT.	

City-St-Zip:

PORT ST. LUCIE, FL 34986

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOVANA GOMEZ VΡ 04/06/2004