

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004110

Entity Name: JLC COMMUNICATION CORP

FILED  
Jan 24, 2005  
Secretary of State

## Current Principal Place of Business:

623 MULBERRY AVE  
SUITE B  
CELEBRATION, FL 34747 US

## Current Mailing Address:

623 MULBERRY AVE  
SUITE B  
CELEBRATION, FL 34747 US

## New Principal Place of Business:

817 VERANDA PL  
SUITE B  
CELEBRATION, FL 34747 US

## New Mailing Address:

PO BOX 470925  
CELEBRATION, FL 34747 US

FEI Number: 36-4519065

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEXAGON INTERNATIONAL, INC  
6205 LAKE WILSON RD  
SUITE C  
DAVENPORT, FL 33896 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: CHOUCARD, JEAN LOUIS  
Address: 623 MULBERRY AVE  
City-St-Zip: CELEBRATION, FL 34747 US

Title: VPT ( ) Delete  
Name: THEUIL, MARIEDOMINIQUE  
Address: 623 MULBERRY AVE  
City-St-Zip: CELEBRATION, FL 34747 US

Title: O ( ) Delete  
Name: JLC CONSEIL,  
Address: 2-6 AV HENRI BARBUSSE  
City-St-Zip: BOBIGNY, FR 93000 FR

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition  
Name: CHOUCARD, JEAN LOUIS  
Address: 817 VERANDA PL  
City-St-Zip: CELEBRATION, FL 34747 US

Title: VPT (X) Change ( ) Addition  
Name: THEUIL, MARIEDOMINIQUE  
Address: 817 VERANDA PL  
City-St-Zip: CELEBRATION, FL 34747 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEAN LOUIS CHOUCARD

P

01/24/2005

Electronic Signature of Signing Officer or Director

Date