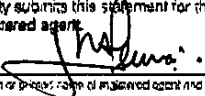
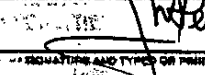


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2005 8:00 am
Secretary of State

04-05-2005 90056 012 ***150.00

DOCUMENT # P03000004875																																							
1. Entity Name JL SERVICES INTERNATIONAL, INC.																																							
Principal Place of Business 7805 CAMINO REAL BLDG H-301 MIAMI, FL 33143		Mailing Address 7805 CAMINO REAL BLDG H-301 MIAMI, FL 33143																																					
2. Principal Place of Business 8745 SW 113 CT Suite, Apt. #, etc.		3. Mailing Address 8745 SW 113 CT Suite, Apt. #, etc.																																					
City & State Miami, FL		City & State Miami, FL																																					
Zip 33173		Country USA																																					
4. FEI Number 03-0509704		Applied For ☐ Not Applicable																																					
5. Certificate of Status Desired ☐		6.75 Additional Fee Required ☐																																					
8. Name and Address of Current Registered Agent KALKAS, MARTTI 245 SE 1ST STREET SUITE 311 MIAMI, FL 33131		7. Name and Address of New Registered Agent Name Jose Luiz Pereira Street Address (P.O. Box Number is Not Acceptable) 8745 SW 113 CT City Miami FL 33173																																					
9. 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 the officer or director of the corporation and I am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 of this report.																																							
SIGNATURE  PD		DATE 4/1/05																																					
FILE NOW! FEE IS \$180.00 After May 1, 2005 Fee will be \$500.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																																					
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																					
<table border="1"> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td>PD PEREIRA, JOSE LUIZ 7805 CAMINO REAL BLVD - H 301 MIAMI, FL 33143</td> <td>☒ Delete</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Delete</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Delete</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Delete</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Delete</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Delete</td> </tr> </table>		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD PEREIRA, JOSE LUIZ 7805 CAMINO REAL BLVD - H 301 MIAMI, FL 33143	☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete	<table border="1"> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td>PD Pereira, Jose Luiz 8745 SW 113 CT Miami, FL 33173</td> <td>☐ Change ☒ Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY-STATE-ZIP</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> </table>		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD Pereira, Jose Luiz 8745 SW 113 CT Miami, FL 33173	☐ Change ☒ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD PEREIRA, JOSE LUIZ 7805 CAMINO REAL BLVD - H 301 MIAMI, FL 33143	☒ Delete																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD Pereira, Jose Luiz 8745 SW 113 CT Miami, FL 33173	☐ Change ☒ Addition																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition																																					
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition																																					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information 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 of this report.																																							
SIGNATURE:  PD		DATE 4/1/05																																					

J0004003



03272006 Chg-P CR2003 (10/03)