

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000012035

FILED
Jan 30, 2006
Secretary of State

Entity Name: 777 COMPLETE MANAGEMENT ENTERPRISE, INC.

Current Principal Place of Business:

5202 LA VENTURA DR E
1701
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

5202 LA VENTURA DR E
1701
JACKSONVILLE, FL 32210 US

New Mailing Address:

P O BOX 40090
JACKSONVILLE, FL 32203 US

FEI Number: 37-1471246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JEFFERSON-GIVENS, TINA R
5202 LA VENTURA DR E #1701
JACKSONVILLE, FL 32210 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: TINA R JEFFERSON-GIVENS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: JEFFERSON, TINA R
Address: 7052 103RD STREET, # 301
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP () Delete
Name: PEAK, TOMI
Address: 5202 LA VENTURA DR E #1701
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: WRIGHT, JUSTINA L
Address: PO BOX 6242
City-St-Zip: JACKSONVILLE, FL 32236

Title: S () Delete
Name: MIXSON, JINA DR
Address: PO BOX 6242
City-St-Zip: JACKSONVILLE, FL 32236

Title: D () Delete
Name: JOHNSON, VANDERLYN
Address: PO BOX 6242
City-St-Zip: JACKSONVILLE, FL 32236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: JEFFERSON, TINA
Address: 7052 103RD STREET, # 301
City-St-Zip: JACKSONVILLE, FL 32210 US

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

Title: D (X) Change () Addition
Name: WRIGHT, JUSTINA L
Address: PO BOX 40090
City-St-Zip: JACKSONVILLE, FL 32203

Title: S (X) Change () Addition
Name: MIXSON, J'NADE
Address: PO BOX 40090
City-St-Zip: JACKSONVILLE, FL 32203

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 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: TINA JEFFERSON

T

01/30/2006

Electronic Signature of Signing Officer or Director

Date