


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 15, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000021714	
1. Entity Name JEN ENTERPRIZES INC.	

Principal Place of Business 12651 METRO PKWY STE # 4 FORT MYERS, FL 33912 US	Mailing Address 12651 METRO PKWY SUITE 4 FORT MYERS, FL 33912 US
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DO NOT WRITE IN THIS SPACE

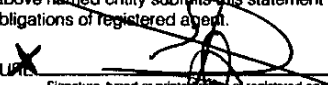


03122007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3768484	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GHIGLIOTTY, EDDIE PRES 12651 METRO PKWY SUITE 4 FORT MYERS FL, FL 33912
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DO NOT WRITE IN THIS SPACE

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  <u>Eddie Ghigliotty</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)</small>	DATE <u>March 12, 07</u>

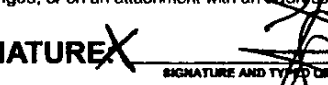
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GHIGLIOTTY, EDDIE P 12651 METRO PKWY ST #4 FT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARDIE, PAUL D VP 12651 METRO PKWY SUITE 4 FT MYERS, FL 33912
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U000000666764 03/26/07-80001-015 150.00</p> DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.	
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SIGNATURE  <u>March 12, 07</u> 239-898-0276 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date Daytime Phone #
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