

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 09, 2006 8:00 am**  
**Secretary of State**

05-09-2006 90087 011 \*\*\*150.00

<b>DOCUMENT # P03000063611</b> 1. Entity Name <b>J.E.A CONSTRUCTION, INC</b>			
Principal Place of Business <b>5565 SW 6TH CT.</b> <b>MARGATE, FL 33068 US</b>		Mailing Address <b>5511 SW 7 PLACE</b> <b>MARGATE, FL 33068 US</b>	
2. Principal Place of Business <b>5511 SW 7 Place</b>		3. Mailing Address <b>5511 SW 7 Place</b>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State <b>Margate FL</b>		City & State <b>Margate FL</b>	
Zip <b>33068</b>		Zip <b>33068</b>	
Country 		Country 	
4. FEI Number <b>02-0694429</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>ARGUETA, JOSE E</b> <b>5511 SW 7 PLACE</b> <b>MARGATE, FL 33068</b>		7. Name and Address of New Registered Agent Name <b>Argueta Jose E.</b> Street Address (P.O. Box Number is Not Acceptable) <b>5511 SW 7 Place</b> City <b>Margate</b> <b>FL</b> Zip Code <b>33068</b>	
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><b>Jose E. Argueta</b></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P</b> <b>ARGUETA, JOSE E</b> <b>5511 SW 7 PLACE</b> <b>MARGATE, FL 33068</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>Pt.</b> <b>5511 SW 7 Place</b> <b>Margate FL 33068</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S</b> <b>ARGUETA, JOSE A</b> <b>275 SW 56TH AVE</b> <b>MARGATE, FL 33068</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>T</b> <b>OCHOA, JULIO R</b> <b>5566 SW 6TH CT</b> <b>MARGATE, FL 33068</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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.			
SIGNATURE: <u><b>Jose E. Argueta</b></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
Date		Daytime Phone #	