

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000070862

Entity Name: JAXJAY, INC.

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

1641 SE AVENUE J
BELLE GLADE, FL 33430

New Principal Place of Business:

1641 SE AVENUE I
BELLE GLADE, FL 33430

Current Mailing Address:

1641 SE AVENUE J
BELLE GLADE, FL 33430

New Mailing Address:

1641 SE AVENUE I
BELLE GLADE, FL 33430

FEI Number: 20-0190656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, DONIA A ESQ.
1100 NORTH MAIN STREET
SUITE C
BELLE GLADE, FL 33430 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: PD () Delete
Name: SMITH, RICHARD E
Address: 1641 SE AVENUE J
City-St-Zip: BELLE GLADE, FL 33430

Title: VSD () Delete
Name: SMITH, JAYNA A
Address: 1641 SE AVENUE J
City-St-Zip: BELLE GLADE, FL 33430

Title: T () Delete
Name: LOHMANN, BRIAN
Address: 1109 NE 2ND STREET
City-St-Zip: BELLE GLADE, FL 33430

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, RICHARD E
Address: 1641 SE AVENUE I
City-St-Zip: BELLE GLADE, FL 33430

Title: VSD (X) Change () Addition
Name: SMITH, JAYNA A
Address: 1641 SE AVENUE I
City-St-Zip: BELLE GLADE, FL 33430

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

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN LOHMANN

TREA

04/10/2008

Electronic Signature of Signing Officer or Director

Date