

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 07, 2004 8:00 am**  
**Secretary of State**

03-22-2004 90052 020 \*\*\*150.00

<b>DOCUMENT # P03000080774</b> 1. Entity Name <b>J &amp; J WEB PAGES, INC.</b>			
Principal Place of Business <b>9210 N PALAFOX ST</b> <b>PENSACOLA, FL 32534</b> <i>Change</i>		Mailing Address <b>9210 N PALAFOX ST</b> <b>PENSACOLA, FL 32534</b>	
2. Principal Place of Business Suite, Apt. #, etc. <b>10 102 Hwy 97 S.</b> City & State <b>Cantonment, FL.</b> Zip <b>32583</b> Country <b>Escambia</b>		3. Mailing Address <b>SAME</b> Suite, Apt. #, etc. City & State Zip Country	
4. FEI Number <b>20-0089416</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>EMPIE, JEREMY L</b> <b>1062 HWY 97 SOUTH</b> <b>CANTONMENT, FL 32533-4682</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State <b>FL</b> Zip Code	
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:  DATE: <b>04/01/04</b>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE <b>PST</b> <input type="checkbox"/> Delete NAME <b>EMPIE, JEREMY L</b> STREET ADDRESS <b>1062 HWY 97 SOUTH</b> CITY-ST-ZIP <b>CANTONMENT, FL 325334682</b>	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 information.			
SIGNATURE:		Date: <b>04/01/04</b>	

**(850) 484-9724**



*Attachment*

66410240

FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

March 25, 2004

J & J WEB PAGES, INC.  
9210 N PALAFOX ST  
PENSACOLA, FL 32534

Subject: J & J WEB PAGES, INC.

Reference Number: P03000080774

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RW

ANNUAL REPORTS SECTION

*please be advised; Mr Jeremy Empire  
has Cerebral Palsy - his signature is as shown  
on the form. m. meadow 484-9724*

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314