


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90025 008 ***150.00

DOCUMENT # P03000110868 1. Entity Name JO JAMZ, INC.	
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Principal Place of Business 6944 S E BUNKER HILL DR HOBE SOUND, FL 33455 US	Mailing Address 6944 S E BUNKER HILL DR 8949 S E BRIDGE RD PMB 340 HOBE SOUND, FL 33455
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40040719



03092007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0306855	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATZ, JOANNE 6944 S E BUNKER HILL DR HOBE SOUND, FL 33455
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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.

SIGNATURE Joanne Matz JOANNE MATZ PRESIDENT 3/13/07 772-546-0636
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #