2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2005
Secretary of State

DOCUMENT# P03000111786

Entity Name: JASON D SMITH GRADING, INC.

Current Principal Place of Business:

14788 CITRUS GROVE BLVD
LOXAHATCHEE, FL 33470

New Principal Place of Business:

15870 42ND ST. NORTH
LOXAHATCHEE, FL 33470

Current Mailing Address:

14788 CITRUS GROVE BLVD
LOXAHATCHEE, FL 33470

New Mailing Address:

15870 42ND ST. NORTH
LOXAHATCHEE, FL 33470

FEI Number: 52-2405485 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SMITH, KAREN M
Address: 757 ORCHID DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete
Name: SMITH, JASON D
Address: 757 ORCHID DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SMITH, KAREN M
Address: 15870 42ND ST. NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D (X) Change ( ) Addition
Name: SMITH, JASON D
Address: 15870 42ND ST. NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAREN M. SMITH D 09/04/2005

Electronic Signature of Signing Officer or Director Date