## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## May 25, 2006 08:00 AM **DOCUMENT # P03000117638** Secretary of State JOHN JARRELL CONSTRUCTION, INC. Mailing Address Principal Place of Business 3781 FRUIT LOOP CIRCLE 378 FRUIT LOOP CIRCLE KISSIMMEE, FL 34741 US KISSIMMEE, FL 34741 US No Cha-P CR2E034 (11/05) 05172008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0317735 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent JARRELL, JOHN DO NOT WRITE 3781 FRUIT LOOP CIRCLE KISSIMMEE, FL 34741 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: Registored Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150,00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2008 10. OFFICERS AND DIRECTORS PTD TITLE JARRELL, JOHN NAME 3781 FRUIT LOOP CIRCLE STREET ADDRESS CITY-ST-ZIP KISSIMMEE, FL 34741 TITLE U00000566060 NAME JARRELL, LENA 05/25/06-80003-015 150.00 3781 FRUIT LOOP CIRCLE STREET ADDRESS CSTY-ST-ZIP KISSIMMEE, FL 34741 mu NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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 of yustee 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 attaching it with an address, with all other like empowered.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-22-06

**FILED**