

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120325

Entity Name: JAMJAX INC

FILED
Aug 31, 2004
Secretary of State

Current Principal Place of Business:

1704 MONTCLAIR COVE COURT
JACKSONVILLE, FL 32259

New Principal Place of Business:

5851 UNIVERSITY BLVD WEST
JACKSONVILLE, FL 32216

Current Mailing Address:

1704 MONTCLAIR COVE COURT
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 54-2136473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

Name and Address of New Registered Agent:

CHIN, GAIRY O GEN MGR
1704 MONTCLAIR COVE COURT
JACKSONVILLE, FL 32259

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: GAIRY O. CHIN

08/31/2004

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: CHIN, GAIRY
Address: 1704 MONTCLAIR COVE COURT
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: CHIN, VINCETA
Address: 1704 MONTCLAIR COVE COURT
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GAIRY O. CHIN

D

08/31/2004

Electronic Signature of Signing Officer or Director

Date