


2005 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

DOCUMENT # P04000011942 1. Entity Name J.A.G. BUILDING DESIGN CONSULTANTS INC.	
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05 AUG -3 AM 11:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/14/05 901 07 010 \$150.00

Principal Place of Business 901 NW 130 AVE PEMBROKE PINES, FL 33028	Mailing Address 901 NW 130 AVE PEMBROKE PINES, FL 33028
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

03082005 Chg-P CR2E034 (10/03)

City & State	City & State
Zip	Country
Zip	Country

4. FEI Number 58-2681222	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
A1A REGISTERED AGENT INC. 92 SADBERRY RD QUINCY, FL 32351

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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.

K. Eckel AUG 09 2005

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS													
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<table border="0" style="width: 100%;"> <tr> <td style="width: 80%;">DVS GRANT, CAROLE 901 NW 130 AVE PEMBROKE PINES, FL 33028</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>PT GRANT, JERONE A SR 901 NW 130 AVE PEMBROKE PINES, FL 33028</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td> </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td> </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td> </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td> </td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> </table>	DVS GRANT, CAROLE 901 NW 130 AVE PEMBROKE PINES, FL 33028	<input type="checkbox"/> Delete	PT GRANT, JERONE A SR 901 NW 130 AVE PEMBROKE PINES, FL 33028	<input type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete		<input type="checkbox"/> Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11													
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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 empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9TH AUGUST 2005

Date Daytime Phone #