2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 24, 2005 8:00 am Secretary of State

1. Entity Name JESTER ENTERPRISES, INC.							02-24-2005	90046 006 ***1:	50.00	
Principal Place of Business 1900 S HARBOR CITY BLVD STE 228 MELBOURNE, FL 32901			Mailing Address 1900 S HARBOR CITY BLVD STE 228 MELBOURNE, FL 32901					20019	3845	
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02182005	Chg-P	CR2E034 (10/03)	ı	
City & State			City & State			4. FEI Number	2439	7 VI H	pplied For lot Applicable	
Zip	Country		Zip	Country				f Status Desired	See Require	
	6. Name and A	ddress of Current R	egistered Agent		ļ		7. Name and A	ddress of New R	egistered Agent	
DERKSEN, JESSICA 1900 S HARBOR CITY BLVD STE 228 MELBOURNE, FL 32901					Name Street Address (P.O. Box Number is Not Acceptable)					
		٠. •			City	•			FL Zip Coo	eb
	named entity submitted a registered a		the purpose of changing its	registore	ed office or	register	ed agent, or both	, in the State of Flo	orida. I am familiar with	, and accept
SIGNATURE_	Signature, typed or printe	d name of registered agent an	d title if applicable. (NOT	E: Registore	ki Agent signatu	re required	when reinstating)		DATE	
FILE NOWI!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.					ncing	\$5. Add	00 May Be ed to Fees			
10.		OFFICERS AND E	DIRECTORS	11.			ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECTOR	RS 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE