2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2008 8:00 am Secretary of State

DOCUMENT # P0400019428 1. Entity Name JESTER ENTERPRISES, INC.								04-21-2008	8 90103	010 ***15	0.00
Principal Place	of Business	Mailing Address			$\neg \neg$						
1900 S HARBOR CITY BLVD STE 229 / DB 1900 S HARBOR CITY BLVE MELBOURNE, FL 32901				Ø 10	8						
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Principal Place of Business - No P.O. Box # Mailing Address											
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			031220	80	Chg-P	CR2	034 (12/06)		
City & State		City & State				4. FEI Nu 52-2	mber 4392	 286		<u> </u>	plied For t Applicable
Zip	Country	Zip	Coun	try		5. Certific	ate of	Status Desired		\$8.75 Add	
	6. Name and Address of Current	Registered Agent	L	<u> </u>		7. Name	and A	ddress of New	Registere		
				7. Name and Address of New Registered Agent Name (PSSICA ZIARN)							
DERKSEN, JESSICA 1900 S HARBOR CITY BLVD STE 228 MELBOURNE, FL 32901			Street Address (P.O. Box Number is Not Acceptable)								
				1900 S. HARBUR City Blud STE 108 City MELBOURNE FL 32901							
	named entity submits this statement fo	r the purpose of changing its	register							m familiar with.	and accept
the obligatio	s of registered agent.								1 1	~ S/	
SIGNATURE	ilgnature, typed or printed name of registered apent is	and trie if applicable. (NOT	E Registere	d Agent signatur	ra required	when reinstatin	a)		DATE	U8	
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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

3/17/08

(321)725 0705

Date Daytime Phone #