

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2005 8:00 am
Secretary of State

07-11-2005 90122 024 ***150.00

DOCUMENT # P04000043647

1. Entity Name
JEALSE CARRIER, INC.



Principal Place of Business Mailing Address
1575 CAREY GLEN CR. **1575 CAREY GLEN CR.**
ORLANDO, FL 32824 **ORLANDO, FL 32824**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

14018478



07062005 Chg-P CR2E034 (10/03)

4. FEI Number **75-3152507** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ALZATE, FABIO A 1575 CAREY GLEN CR. ORLANDO, FL 32837		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.

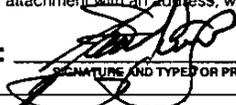
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees** In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALZATE, FABIO A 1575 CAREY GLEN CR. ORLANDO, FL 32824 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:  **- President** 07/06/05 (321) 263-6827

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

14018478

P040000 43647

To: Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

From: Jealse Carrier, Inc.
1575 Carey Glen Cr.
Orlando, FL 32824
(321) 263-6827

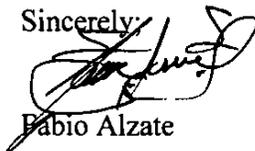
RE: 2005 Annual Report

To Whom It May Concern:

This is to notify you that I am only submitting the fee of \$150.00 because I did not received prior notice of the Annual Renew. This is my first year doing the renewal of the corporation so I was not really aware of this, I will be more careful for next year renewal.

If you need to contact me in regards to this matter, please do not hesitate to give me a call and I will be more than gladly to assist you.

Sincerely,



Fabio Alzate