2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000061953

1. Entity Name
JAKAYA, INC.

Principal Place of Business	Mailing Address
4732 OUTLOOK DRIVE MELBOURNE, FL 32940	4732 OUTLOOK DRIVE MELBOURNE, FL 32940

DO NOT WRITE IN THIS SPACE

04112008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
56-2452815	Not Applicable

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

6. Name and Address of Current Registered Agent

MCKINLAY, LORRAINE B
4732 OUTLOOK DRIVE
MELBOURNE, FL 32940

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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 _Lorraine B. Mc Kinlay_

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

April 11, 2008
DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00
Check # 738

9. Election Campaign Financing
Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	PVST	
NAME	MCKINLAY, LORRAINE B	
STREET ADDRESS	4732 OUTLOOK DRIVE	
CITY-ST-ZIP	MELBOURNE, FL 32940	
TITLE	D	
NAME	MCKINLAY, LORRAINE B	
STREET ADDRESS	4732 OUTLOOK DRIVE	
CITY-ST-ZIP	MELBOURNE, FL 32940	
TITLE		
NAME		
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TITLE		
NAME		
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CITY-ST-ZIP		

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04/25/08-80078-005 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _Lorraine B. Mc Kinlay_   _April 11, 2008_   (321)-253-5786

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