## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT # P04000078061

## **FILED** Mar 22, 2005 8:00 am Secretary of State 03-22-2005 90013 022 \*\*\*158.75

Entity Name     J-QUALIT	e Y FENCE, INC.							
Principal Place of Business		Mailing Address						
1008 HIDDEN HARBOR APT# G2		1008 HIDDEN HARBOR APT# G2			20023779			
MELBOURNE,	, FL 32935	MELBOURNE, FL 3293		1		1 <b>85</b> 01 1 <b>310</b> 1 1011 5011 601 61		
2. Principal Place of Business		3. Mailing Address 1008 Hidden						
Melbarne Suite Apt #, etc.		Harbour Dr Suite App #, etc.						
(4-0)		(1-2		03112005	Chg-P	CR2E034 (10/03)		
Ofty & State	ourne FL	City & State  Mcl by Lyne	· FL	4. FEI Number		<del>  7   ·</del>	pplied For	
- Zip	Country	Zip	Country			/ ¢9.75	t Applicable	
<u>36935</u>		32935			of Status Desired	Fee Require		
-	6. Name and Address of Current	Registered Agent	Name 🗸 -	7. Name and	Address of New R	egistered Agent		
INGRAHAN	M, JASON E	ngela M	1. 1017					
APT# G2	DEN HARBOR	Street Addre	ess (RD. Box Numbe HICIO (C)	is Not Acceptable	"Or.			
MELBOURNE, FL 32935								
	•		Malk	polirne		FL 353	35	
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—Ca.Son   nara-hourn   3/15/05 Signature, hypert or printed name of registered agent and table it epolicable.   (Librit: Registered Agent signature required when reinstating)   DATE								
	E NOW!!! FEE IS \$150.00 by 1, 2005 Fee will be \$550.	9. Election Campaid Trust Fund Contr		\$5.00 May Be Added to Fees				
10.	OFFICERS AND		, 11.	ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11	
. TITLE NAME	P INGRAHAM, JASON E	☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS	1008 HIDDEN HARBOR, APT# (	G2 ·	STREET ADDRESS		•			
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP					
TITLE NAME	VP	☐ Delete	TITLE			☐ Change	☐ Addition	
STREET ADDRESS	INGRAHAM, JASON E   1008 HIDDEN HARBOR, APT# (	32	NAME STREET ADDRESS				ļ	
CITY-S1-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP				1	
TITLE	SEC	Delete	TITLE S	ec.	_	Change	☐ Addition	
NAME STREET ADDRESS	NGRAHAM, JASON E 1008 HIDDEN HARBOR, APT# (	32	NAME Y	ingela vol	<del>Z</del> .	0 ==0		
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	2016 A localer Willoway The	1 Harbou	or Or aprig	_9	
TITLE	TRE	☐ Delete	TITLE	MILL KALL I		☐ Change	Addition	
NAME	INGRAHAM, JASON E	20	NAME					
STREET ADDRESS CITY-ST-ZIP	1008 HIDDEN HARBOR, APT# ( MELBOURNE, FL 32935	32	STREET ADDRESS CITY-ST-ZIP					
TITLE		Delete	TITLE			☐ Change	Addition	
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	LUFE			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS				:	
CITY-ST-ZIP			CITY-SI-ZIP		•		* 1	
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 empoyered.								
SIGNATURE: 3/15/05 (321)720-8937								
	SIGNATURE AND TYPED OR	PHINTED NAME OF SIGNING OFFICER	OR DIRECTOR		nate	JOY 1 M/ J TO	701	