## **2007 FOR PROFIT CORPORATION**

## FILED **ANNUAL REPORT** Jan 18, 2007 08:00 AM **DOCUMENT # P04000087174 Secretary of State** REJOICE PROPERTIES INC. Principal Place of Business Mailing Address 195 SW ROUNDHOUSE CT 195 SW ROUNDHOUSE CT FORT WHITE, FL 32038 FORT WHITE, FL 32038 CR2E034 (11/05) 01152007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 74-3123801 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YAGUAL, BENINNIDA G DO NOT WRITE 195 SW ROUNDHOUSE CT FORT WHITE, FL 32038 IN THIS SPACE 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. Signature, broad or printed name of registered agent and title if explicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 U00000590369 Added to Fees Trust Fund Contribution. 01/18/07-80053-012 150.00 10. OFFICERS AND DIRECTORS PRES TITLE ALMONTE, MANUEL F NAME STREET ADDRESS 195 SW ROUNDHOUSE CT CITY-ST-7IP FORT WHITE, FL 32038 TITLE ALMONTE, ROSEMARY STREET ADDRESS 195 SW ROUNDHOUSE CT CITY-ST-ZIP FORT WHITE, FL 32038 DIRE ALMONTE, FRANK NAME 195 SW ROUNDHOUSE CT STREET ADDRESS DO NOT WRITE CITY-ST-ZIP FORT WHITE, FL 32038 DIR IN THIS SPACE TITLE YAGUAL, BENINNIDA G NAME 195 SW ROUNDHOUSE CT STREET ADDRESS FORT WHITE, FL 32038 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

TOTLE NAME STREET ADDRESS CITY-ST-ZIP