2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: .

May 07, 2007 08:00 A Secretary of State **DOCUMENT # P04000105854** 1. Entity Name JELA CORP. Principal Place of Business Mailing Address 1647 NW 144 WAY 1647 NW 144 WAY PEMBROKE PINES, FL 33028 PEMBROKE PINES, FL 33028 04272007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3603387 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOPEZ, JORGE E DO NOT WRITE 18565 SW 104 AVE. MIAMI, FL 33157 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, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PST TITLE LOPEZ, JORGE E NAME STREET ADDRESS 1647 NW 144 WAY U00000761778 CITY-ST-ZIP PEMBROKE PINES, FL 33028 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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

OFFICER OR DIRECTOR

FILED