2007 FOR PROFIT CORPORATION ANNUAL REPORT

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1. Entity Nam JND TRA	10						2007 SEP 14	+ PM	2: 23			
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Principal Place of Business Mailing Address								TALLAHASS	FF FI	DDID A		
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ORLANDO, FL 32824 ORLANDO, FL 32824												
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Principal Place of Business - No P.O. Box # 3. Mailing Address							 		. 1			
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Suite, Apt.	#, etc.	•	Suite, Apt. #, etc.			09132007	Chg-P	CR2E	34 (12/06)			
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Ki Sa	mme	e,A	City & State Kissin number, FL				4. FEI Numb				pplied For at Applicable	
Zip		Country	Zip	ntry			of Status Desired		\$8.75 Add	fitional		
347	34759 US		34159		<u>us</u>)				Fee Require	d	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name						
GUADALUPE, LUIS P												
1143 TIME					Street Address (P.O. Box Number is Not Acceptative)							
ORLANDO, FL 32824						ZZI CIMITOTON DI						
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1 City Kissimmee FL										- ^z ibsgy	759	
			the pyrpose of changing its	register	ed office o	r register	ed agent, or bo	oth, in the State of Flor	rida. Lam	familiar with,	and accept)	
the obligations of equistered agent?												
SIGNATURE JUST JUST JUST 19-14.07												
Signature, typed or printed time of unstered agent and title if application (NOTE: Registered Agent signature required when reinstating) DATE												
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007 9. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution.												
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS	/CHANGES TO OFFI	CERS ANI	DIRECTOR:	S IN 11	
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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 it made under oath; that I am an officer or director of the corporation or the receiver of 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 from all other like empowered.												
SIGNATURE: * Surffyrog 9.14.07												
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Displants Phone												
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #												