

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124577

Entity Name: J.A.J. MANAGEMENT, INC.

FILED
Jan 18, 2008
Secretary of State

Current Principal Place of Business:

17130 ARVIDA PARKWAY SUITE 1 AND 2
WESTON, FL 33131

Current Mailing Address:

17130 ARVIDA PARKWAY SUITE 1 AND 2
WESTON, FL 33131

New Principal Place of Business:

17130 ROYAL PALM BLVD
SUITE 1+2
WESTON, FL 33326

New Mailing Address:

17130 ROYAL PALM BLVD
SUITE 1+2
WESTON, FL 33326

FEI Number: 20-1656026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAUB, MATTHEW
17130 ARVIDA PARKWAY SUITE 1 AND 2
WESTON, FL 33131 US

Name and Address of New Registered Agent:

TAUB, MATTHEW
17130 ROYAL PALM BLVD
SUITE 1+2
WESTON, FL 33326 US

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.

SIGNATURE:

01/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FAIERMAN, TAMY
Address: 17130 ARVIDA PARKWAY SUITE 1 AND 2
City-St-Zip: WESTON, FL 33131

Title: D () Delete
Name: TAUB, MATTHEW
Address: 601 N FLAMINGO RD SUITE 403B
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FAIERMAN, TAMY
Address: 17130 ROYAL PALM BLVD, SUITE 1+2
City-St-Zip: WESTON, FL 33326

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAMY M. FAIERMAN, MD

MD

01/18/2008

Electronic Signature of Signing Officer or Director

Date