

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000129474

1. Entity Name
JUMP ON IT, INC.



FILED
Feb 13, 2006 08:00 AM
Secretary of State

Principal Place of Business
**4840 SW 170TH AVE
FT LAUDERDALE, FL 33331**

Mailing Address
**4840 SW 170TH AVE
FT LAUDERDALE, FL 33331**



01232006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1647525

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MARKS, DANNY
4840 SW 170TH AVE
FT LAUDERDALE, FL 33331**

**DO NOT WRITE
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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

U000000432924
02/23/06-80088-016 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARKS, DANNY 4840 SW 170TH AVE FT LAUDERDALE, FL 33331
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MARKS, ALIDA E 4840 SW 170TH AVE FT LAUDERDALE, FL 33331
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANNY MARKS

1/24/06

Date

Daytime Phone #