2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # P04000130556 1. Entity Name 02-07-2005 90067 048 ***150.00 J & F GLOBAL ENTERPRISES, INC. Mailing Address Principal Place of Business 18120 SAN CARLOS BLVD PH1206 FT MYERS BEACH FL 33931 18120 SAN CARLOS BLVD PH1206 FT MYERS BEACH FL 33931 10000000 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 1st MOORE City & State City & State 4. FEI Number Applied For 20-134392 Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SMITH, FORREST H Street Address (P.O. Box Number is Not Acceptable) 18120 SAN CARLOS BLVD PH1206 FT MYERS BEACH FL 33931 Zip Code City 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 here of registered agent and tife if applicable (NOTE: Registered Agent signature required when remaining) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5,00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE TITLE Addition SMITH, JULIA 284 840 MALIE 18120 SAN CARLOS BLVD PH1206 STREET ADDRESS STREET ADDRESS FT MYERS BEACH FL 33931 CITY-ST-ZIP Q1Y-51-7P TITLE ☐ Delete TITLE ☐ Change Addition SMITH, FORREST H NAME MALIF STREET ADDRESS 18120 SAN CARLOS BLVD PH1206 STREET ADDRESS CITY-ST-ZIP FT MYERS BEACH FL 33931 CITY-ST-ZIP TITLE ☐ Deleta TITLE ☐ Change ☐ Addition NAME SMITH, FORREST H NAME STREET ADDRESS STREET ADDRESS 18120 SAN CARLOS BLVD PH1206 CITY-ST-7iP FT MYERS BEACH FL 33931 CITY-ST-7P TITLE Octate Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-7tP CITY-SI-ZIP Addition | TITLE ☐ Delete NAME NALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition ☐ Delete ☐ Chance NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under onth; 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. Forvest SIGNATURE:

FILED

Mar 21, 2005 8:00 am