

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000134830

Entity Name: JDB DEVELOPMENT, INC.

FILED  
May 26, 2005  
Secretary of State

## Current Principal Place of Business:

9410 WEST FLAGLER STREET  
APT 205  
MIAMI, FL 33174

## New Principal Place of Business:

## Current Mailing Address:

9410 WEST FLAGLER STREET  
APT 205  
MIAMI, FL 33174

## New Mailing Address:

FEI Number: 56-2485002      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BACARDI, YOLANDA  
9410 W. FLAGLER STREET  
APT 205  
MIAMI, FL 33174 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BACARDI, YOLANDA  
Address: 9410 WEST FLAGLER STREET, APT 205  
City-St-Zip: MIAMI, FL 33174

Title: VP ( ) Delete  
Name: BACARDI, JOSE  
Address: 9410 WEST FLAGLER STREET, APT 205  
City-St-Zip: MIAMI, FL 33174

Title: VP ( ) Delete  
Name: BACARDI, JOSEFINA  
Address: 9410 WEST FLAGLER STREET, APT 205  
City-St-Zip: MIAMI, FL 33174

Title: VP ( ) Delete  
Name: BACARDI, MIREYA  
Address: 9410 WEST FLAGLER STREET, APT 205  
City-St-Zip: MIAMI, FL 33174

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: YOLANDA BACARDI

P

05/26/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date