2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155281

Entity Name: J & J CLIENT SERVICES, INC.

FILED Apr 07, 2005 Secretary of State

Current Principal Place of Business:				New Prince	New Principal Place of Business:			
	BLEWOOD DR	RIVE						
517 CORAL SF	PRINGS, FL 33	8071 U	S					
Current M	ailing Address	s:		New Maili	ng Address	::		
	BLEWOOD DR	RIVE						
517 CORAL SF	PRINGS, FL 33	8071 U	S					
FEI Number:	20-1880029	FEI Numb	ber Applied For()	FEI Number Not App	licable ()	Certificate of Status Desire	d ()	
Name and	Address of C	urrent Re	egistered Agent:	Name and	Name and Address of New Registered Agent:			
517 CORAL SF The above	BLEWOOD DR PRINGS, FL 33	8071 US	is statement for the p	ourpose of changing i	ts registered	d office or registered agent,	or both,	
SIGNATUR	RE:							
	Electroni	ic Signatu	re of Registered Age	ent		Date		
Election Car	npaign Financing	Trust Fund	d Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () SALTARES, JOS 9175 RAMBLEW CORAL SPRING	VOOD DRIV	,	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	SALTARES, 9175 RAMBI	() Change (X) Addition JENNIFER LEWOOD DRIVE, APT. # 517 INGS, FL 33071 US		

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: JOSUE SALTARES P 04/07/2005