


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 05, 2006 8:00 am**  
**Secretary of State**

09-05-2006 90024 030 \*\*\*158.75

<b>DOCUMENT # P05000004026</b> 1. Entity Name <b>JDS INVESTMENTS GROUP INC</b>					
Principal Place of Business <b>2801 NW 24TH COURT FORT LAUDERDALE, FL 33311</b>			Mailing Address <b>PO BOX 101016 FORT LAUDERDALE, FL 33310</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>JOE, SNELL 2801 NW 24 COURT FORT LAUDERDALE, FL 33311</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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: <i>Joe Snell</i> <small>Signature, typed or printed name of registered agent and title, if applicable.</small>		<b>JOE SNELL (PRESIDENT)</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>		<b>8/29/06</b> <small>DATE</small>	
<b>FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>DENESE, SNELL</b> <b>2801 NW 24 COURT</b> <b>FORT LAUDERDALE, FL 33311</b> <div style="text-align: right;"> <input checked="" type="checkbox"/> Delete  <b>CHANGE TITLE</b> </div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>DENESE SNELL</b> <b>2801 NW 24th CT</b> <b>FT. LAUDERDALE, FL 33311</b> <div style="text-align: right;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition       </div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>JOE, SNELL</b> <b>2801 NW 24 COURT</b> <b>FORT LAUDERDALE, FL 33311</b> <div style="text-align: right;"> <input checked="" type="checkbox"/> Delete  <b>CHANGE TITLE</b> </div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>JOE SNELL</b> <b>2801 NW 24th CT</b> <b>FT LAUDERDALE, FL 33311</b> <div style="text-align: right;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition       </div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
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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 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>Joe Snell</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<b>JOE SNELL (PRESIDENT)</b> <small>Date</small>		<b>8/29/06</b> <small>Daytime Phone #</small>	
				<b>(954) 739-4589</b>	

60038371



07312006 Chg-P CR2E034 (11/05)

4. FEI Number **22-3915743** Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional  
Fee Required**