

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000019271

Entity Name: JNC GRAPHICS, INC.

FILED
Aug 06, 2007
Secretary of State

Current Principal Place of Business:

2005 TREE FORK LN.
121
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

2005 TREE FORK LN.
121
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 20-2309567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEW, JAMES R
22212 MONTROSE AVE
PORT CHARLOTTE, FL 33952 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: CRIVELLARI, JOHN
Address: 607 E MATTIE ST
City-St-Zip: SANFORD, FL 32773

Title: DV () Delete
Name: CRIVELLARI, NICHOLAUS
Address: 607 E MATTIE ST
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: CRIVELLARI, JOHN
Address: 2005 TREE FORK LN #121
City-St-Zip: LONGWOOD, FL 32750

Title: DV (X) Change () Addition
Name: CRIVELLARI, NICHOLAS
Address: 2005 TREE FORK LN #121
City-St-Zip: LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOHN CRIVELLARI

DPST

08/06/2007

Electronic Signature of Signing Officer or Director

Date