## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000033517

Entity Name: JLE GENERAL SERVICES, INC.

PORT SAINT LUCIE, FL 34953

City-St-Zip:

FILED Jul 19, 2007 Secretary of State

Littly Name: SEE SEINENAL SEINVISES, INS.	
Current Principal Place of Business:	New Principal Place of Business:
1550 S.W. APACHE AVE. PORT ST. LUCIE, FL 34953	1358 SW EMPIRE STREET PORT ST. LUCIE, FL 34983
Current Mailing Address:	New Mailing Address:
1550 S.W. APACHE AVE. PORT ST. LUCIE, FL 34953	1358 SW EMPIRE STREET PORT ST. LUCIE, FL 34983
FEI Number: 20-2442372 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	
TAX HOUSE CORPORATION 1261 E. SAMPLE RD. POMPANO BEACH, FL 33060 US	
The above named entity submits this statement for the in the State of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered A	gent Date
In accordance with s. 607.193(2)(b), F.S., the corporation did Election Campaign Financing Trust Fund Contribution ().	not receive the prior notice.
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P () Delete	Title: P (X) Change ( ) Addition

Title: P () Delete Title: P (X) Change () Addition Name: ADRIANZA, JOSE GREGORIO Name: ADRIANZA, JOSE GREGORIO Address: 1550 S.W. APACHE AVE. Address: 1358 SW EMPIRE STREET City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP () Delete Title: VP (X) Change () Addition Name: ADRIANZA, LEONNY A. Address: 1550 S.W. APACHE AVE. Address: 1358 SW EMPIRE STREET

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.

City-St-Zip:

SIGNATURE: JOSE GREGORIO ADRIANZA P 07/19/2007

PORT SAINT LUCIE, FL 34983