


2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jun 09, 2006 8:00 am
Secretary of State

05-01-2006 90407 034 ***150.00

DOCUMENT # P05000034039			
1. Entity Name J. ALE HOUSE INC.			
Principal Place of Business 13748 CORONADO DRIVE SPRING HILL, FL 34609 US		Mailing Address 13748 CORONADO DRIVE SPRING HILL, FL 34609 US	
2. Principal Place of Business 7430 US Hwy 19 Suite, Apt. #, etc.		3. Mailing Address 13239 Asbury St. Suite, Apt. #, etc.	
City & State New Port Richey FL		City & State Spring Hill, FL	
Zip 34652		Zip 34609	
Country US		Country US	
4. FEI Number 20 2435055		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent URBAN, SCOTT 13239 ASBURY STREET SPRING HILL, FL 34609		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	
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		DATE	
Signature, typed or printed name of registered agent and use if applicable.		(NOTE: Registered Agent signature required when remaining)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	URBAN, SCOTT	NAME	
STREET ADDRESS	13239 ASBURY STREET	STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL, FL 34609	CITY - ST - ZIP	
TITLE	VD <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAZIANO, SALVATORE J	NAME	
STREET ADDRESS	13748 CORONADO DRIVE	STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL, FL 34609	CITY - ST - ZIP	
TITLE	STD <input checked="" type="checkbox"/> Delete	TITLE	DST VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALLEN, DONNA	NAME	Urban, Donna
STREET ADDRESS	13239 ASBURY STREET	STREET ADDRESS	13239 Asbury st
CITY - ST - ZIP	SPRING HILL, FL 34609	CITY - ST - ZIP	Spring Hill, FL 34609
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
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.			
SIGNATURE: <i>Scott Urban</i> SCOTT URBAN		Date: 6/11/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #: 352 3978959	