


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000041136	
1. Entity Name JASON & SIBS, INC.	

Principal Place of Business 7080 NW 10TH COURT PLANTATION, FL 33313	Mailing Address 7080 NW 10TH COURT PLANTATION, FL 33313
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DO NOT WRITE IN THIS SPACE



06212007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2422773	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent AB CONSULTING & ACCOUNTING SERVICES, INC. 6237 MIRAMAR PARKWAY 200 MIRAMAR, FL 33023
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOLLY, CUMI T 7080 NW 10TH COURT PLANTATION, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOLLY, CUMI T 7080 NW 10TH COURT PLANTATION, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOLLY, KIM D 7481 NW 35 STREET LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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06/28/07-80001-004 150.00

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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.			
SIGNATURE: <u>Cumi Jolly</u>	<u>Cumi Jolly</u>	<u>6/24/07</u>	<u>984-394-1867</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>