2006 FOR PROFIT CORPORATION

ANNUAL REPORT 03-29-2006 90111 031 ***150.00 **DOCUMENT # P05000052755** 1. Entity Name JUST JESSI, INC. 66010723 Principal Place of Business Mailing Address 333 N.W. 36TH COURT 333 N.W. 36TH COURT BOCA RATON, FL 33431 BOCA RATON, FL 33431 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Act, #, etc. 02172006 CR2E034 (11/05) Cha-P 4 FEI Number 20-2735119 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TANNENBAUM, JESSI Street Address (P.O. Box Number is Not Acceptable) 333 N.W. 36TH COURT BOCA RATON, FL 33431 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ed to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Octate TITLE Charage ☐ Addition TANNENBAUM, JESSI NAME NAME STREET ADDRESS 333 N.W. 36TH COURT STREET ADDRESS BOCA RATON, FL 33431 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ACCORESS STREET ADDRESS CITY - ST - ZIP CITY-51-29 Delete MILE TITLE Chance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-709 ☐ Detete TITLE ☐ Change Addition MILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP Deleta TITLE Change ☐ Addition TITLE MALA NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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 cath; 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 is changed, or on an attact ment with an address, with all other like empowered.

SIGNATURE:

SIGNATUR

STREET ADDRESS

CITY-ST-ZP

TITLE

Delete

SIGNATURE:X

NAME

STREET ADORESS

☐ Chance

☐ Addition

FILED Apr 19, 2006 8:00 am Secretary of State