2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000063111 03-10-2006 90008 005 ***150.00 1. Eptity Flame JIMMYLAND CORP Principal Place of Business Mailing Address 2804 E CROSLEY DR, SUITE H 2804 E CROSLEY DR, SUITE H 66006200 WEST PALM BEACH, FL 33415 WEST PALM BEACH, FL 33415 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Sulte, Apt. #, etc. CR2E034 (11/05) 01182008 Cha-P City & State City & State Applied For Not Applicable Country Country \$8.75 Additional 5. Cartificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROBINSON, JIMMY D JR 2804 E CROSLEY DR, SUITE H Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH, FL 33415 City 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 egent. (NOTE: Registered Agent signature required when reinstating DATE \$5.00 May Be Added to Fees 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CEO TITLE ☐ Delete TITLE Change Addition NAME ROBINSON, JIMMY D NAME 2804 E CROSLEY DR. SUITE H STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33415 CITY-51-20 IIILE ☐ Deleta TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP me Delete TITLE Addition STREET ADDRESS STREET ADDRESS CITY-\$1-20P CITY-ST-ZP TITLE C Deteta Change Addition NUME STREET ADDRESS STREET ADDRESS CITY-ST-29 CITY-ST- 77 ☐ Deteta TITLE ☐ Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-51-28 CITY-ST-ZIP 12. Thereby certify that the information supplied with this fitting does not qualify for the examptions 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, Figrida, Statutes; and that my narper appears in Block 10 or Block 110 or Block 10 o SIGNATURE:

FILED Mar 21, 2006 8:00 am Secretary of State



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2006

JIMMYLAND CORP 2804 E CROSLEY DR, SUITE H WEST PALM BEACH, FL 33415

Subject: JIMMYLAND CORP

Reference Number:

P05000063111

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/cj ANNUAL REPORTS SECTION