2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067063

Entity Name: J.SSENTRIC ENTERTAINMENT INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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1739 SILVERWOOD DRIVE 1221 COMMERCIAL PARK DR. TALLAHASSEE, FL 32301

SUITE G-1

TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

P. O. BOX 38445 TALLAHASSEE, FL 32315

FEI Number: 87-0744687 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

BROWN, ROBERT A BROWN, ROBERT A 1739 SILVERWOOD DRIVE 1221 COMMERCIAL PARK DR TALLAHASSEE, FL 32301 US SUITE G-1 TALLAHASSEE, FL 32301 US

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.

SIGNATURE: ROBERT A BROWN 04/30/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: CFO (X) Change () Addition

BROWN, ROBERT A BROWN, ROBERT A Name: Name: P. O. BOX 38445 P. O. BOX 38445 Address: Address: City-St-Zip: TALLAHASSEE, FL 32315 City-St-Zip: TALLAHASSEE, FL 32315

Title: Title: () Delete COO (X) Change () Addition

DELPHONSE, JERFSON Name: Name: DELPHONSE, JERFSON P. O. BOX 38445 P. O. BOX 38445 Address: Address:

TALLAHASSEE, FL 32315 TALLAHASSEE, FL 32315 City-St-Zip: City-St-Zip:

Title: Title: CFO (X) Delete () Change () Addition

LEWIS, BIANCA J Name: Name: P O BOX 38445 Address: Address: City-St-Zip: TALLAHASSEE, FL 32315 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

SMITH, SHAWNDREAL D Name: Name: Address: P. O. BOX 38445 Address: City-St-Zip: TALLAHASSEE, FL 32315 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

MITCHELL, LORA Name: Name: P. O .BOX 38445 Address: Address: City-St-Zip: TALLAHASSEE, FL 32315 City-St-Zip:

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.

SIGNATURE: ROBERT A BROWN CEO 04/30/2007