2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

Principal Place of Business 1 ASS E 23RD DRIVE HOMESTEAD, FL 3030S 2. Principal Place of Dusiness 3. Mailing Address 2. Principal Place of Dusiness 3. Mailing Address 3. Mailing Address 3. Mailing Address 4. FER Number 20 Country 20 Country 20 Country 20 Country 3. Country 4. FER Number 20 Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. Selection Correlation 8. Selection Correlation 8. Selection Correlation 9. Selecti	DOCUMENT # P05000086525 1. Entity Name JANETSY INC.)4-21-2006 90	_		
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Name and Address of Current Registered Agent	Zip Country		Zip	Zip Country				п :	8.75 Add	litional
Addition		6. Name and Address of Curren	t Registered Agent		1	7. Name and	Address of New F			
ASSE 23RD DRIVE HOMESTEAD, FL 33035 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, topic or printed rearry of implifience agent and the it apoliticities. (INTE Registered Agent spinkture required where remaining). DATE File NOWITE FEE IS S150_00					Name ·				=	
8. The above named entity submits this statement for the purpose of changing its registered algent, or both, in the State of Florida. I am lamatilar with, and accept the obligations of registered agent. SIGNATURE Signature Signa	1435 SE 23RD DRIVE				Street Address (P.O. Box Number is Not Acceptable)					
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Comparison	1101112312	JAB, 1 E 33033								
THE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 2. Election Campaign Financing Trust Fund Contribution. 3. Added to Fees Ad					City			FL	Zip Code	e
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Horida 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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTO

4/13/06 247-2394