

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 08:00 A
Secretary of State

DOCUMENT # P05000123878

1. Entity Name
J A REALTY, INC.



Principal Place of Business
1649 FORUM PLACE, SUITE 11
W. PALM BCH, FL 33401

Mailing Address
1649 FORUM PLACE, SUITE 11
W. PALM BCH, FL 33401



01042007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-3760199	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

KIRBY, JOSEPH H III
1649 FORUM PLACE, SUITE 11
W. PALM BCH, FL 33401

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTS
NAME	KIRBY, JOSEPH H III
STREET ADDRESS	1649 FORUM PLACE SUITE 11
CITY-ST-ZIP	WEST PALM BEACH, FL 33401

TITLE	D
NAME	VADIA, ALEJANDRO R
STREET ADDRESS	600 GRAPETREE DRIVE APT 5AS
CITY-ST-ZIP	KEY BISCAYNE, FL 33149

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
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CITY-ST-ZIP	

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04/10/07-80070-011 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #