

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000149387

Entity Name: JSL TECHNOLOGIES, INC.

FILED  
Feb 12, 2008  
Secretary of State

## Current Principal Place of Business:

6017 PINE RDGE ROAD  
NAPLES, FL 34119 US

## New Principal Place of Business:

6017 PINE RIDGE ROAD  
NAPLES, FL 34119 US

## Current Mailing Address:

6017 PINE RIDGE ROAD  
NAPLES, FL 34119

## New Mailing Address:

FEI Number: 06-1772862      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SVOBODA, RENEE  
6017 PINE RIDGE ROAD  
NAPLES, FL 34119 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete  
Name: ELLERBY, BRIAN  
Address: 307 GOODLETTE ROAD, SUITE 203B  
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Delete  
Name: HUDD, NEIL P  
Address: 2851 W. KEITHTEEN RD  
City-St-Zip: PHOENIX, AZ 85053

Title: D ( ) Delete  
Name: SVOBODA, E. RENEE  
Address: 6017 PINE RIDGE ROAD  
City-St-Zip: NAPLES, FL 34119 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: E. RENEE SVOBODA

DIR

02/12/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date