

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000034929

FILED
Jan 09, 2007
Secretary of State

Entity Name: THE JUFFE GROUP ACCOUNTING SOLUTIONS, INC.

Current Principal Place of Business:

411 COMMERCIAL CT., STE. D
VENICE, FL 34292

New Principal Place of Business:

1790 EAST VENICE AVENUE
SUITE 202
VENICE, FL 34292

Current Mailing Address:

411 COMMERCIAL CT., STE. D
VENICE, FL 34292

New Mailing Address:

1790 EAST VENICE AVENUE
SUITE 202
VENICE, FL 34292

FEI Number: 20-4466068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JUFFE, ALEJANDRA M.
411 COMMERCIAL CT., STE. D
VENICE, FL 34292 US

Name and Address of New Registered Agent:

JUFFE, ALEJANDRA M.
1790 EAST VENICE AVENUE
SUITE 202
VENICE, FL 34292 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: ALEJANDRA JUFFE

01/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JUFFE, JORGE S.
Address: 8872 VENTURA WAY
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: JUFFE, ALEJANDRA M.
Address: 8872 VENTURA WAY
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JUFFE, JORGE S.
Address: 5660 HAMMOCK ISLES DRIVE
City-St-Zip: NAPLES, FL 34119

Title: D (X) Change () Addition
Name: JUFFE, ALEJANDRA M.
Address: 5660 HAMMOCK ISLES DRIVE
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify for the 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: ALEJANDRA JUFFE

D

01/09/2007

Electronic Signature of Signing Officer or Director

Date