2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jun 21, 2007 8:00 am Secretary of State

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DOCUMENT # P06000047470  1. Entity Name E T & K JAMAICAN STYLE, INC.					05-03-2007 90043 021 ***150.00					
Principal Place of Business  5825 WEST HALLANDALE BEACH BLVD. WEST PARK, FL 33023  MIRAMAR, FL 33023  MIRAMAR, FL 33023			CLE		1 ( <b>TR</b> 11 <b>U</b> 1) (1	66019547				
2. Principal Pla	ace of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt, W. etc.			04102007	Chg-P	CR2E	034 (12/06)		
City & State		City & State			4. FEI Numb	4679	91	<del>, , ,</del>	plied For t Applicable	
Zip	Country	Zip Country		lry	5, Certificate	of Status Desire	ad 🔲	\$8.75 Add Fee Required		
	5. Name and Address of Current	Registered Agent			7. Name and	Address of No	w Registered	Agent		
				Name	٠					
SPIEGEL & UTRERA, P.A.				Poul		<del>n</del> al(			<del></del> -	
1840 SW 22ND ST.				Street Addres	ss (P.O. Box Numb	er is Not Accept	iable)	. <b>₽</b>	Kl Jel	
4TH FLOOR				1 .	, <u>, , , , , , , , , , , , , , , , , , </u>		,		vi net	
MIAMI, FL 33145 :				Malle	c walale	KS	B(xcl			
				City	<del>D</del>	. 10:	FI	Zip Code	023	
The above named entity submits this explement for the purpose of changing its registered of					T Pa					
	named entity submits this eletement is one of registered agent.	or the purpose of changing its	registere	so once or reds	siered agent, or bo	un, withe State (	Ji Monoa. Tan	напина мил,	and accept	
SIGNATURE 4-10-07									2~	
SIGNATURE Signature, typed or primited nerve of regulations agent and that if applicable (NOTE Registered Agent signature recurred)						<del></del>	DATE	<del>7 - 10</del>	<u>· 0</u> /	
	militarie, librito o bassa con actual de la constante al	(100								
		9. Election Campa	ian Einar	ocino (	EE 00 w n-	ŀ				
	E NOW!!!  FEE IS \$150.00 ay 1, 2007 Fee will be \$550.	l '		`	\$5.00 May Be Added to Fees					
ATELY 1014	ay 1, 2007 Fee Will be \$330.	.00								
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO	OFFICERS AN			
TITLE	PD ,	☐ Delete	TITU	E ]				Change	Addition	
HAME	DIXON, TAMIKA		NAM	E						
STREET ADORESS	5825 WEST HALLANDALE BEACH BLVD.			ET ADDRESS						
CITY-ST-ZIP	WEST PARK, FL 33023		CITY	-SI-ZP						
TITLE	VD	☐ Delete	TITL	Ε				Change	Addition	
NAME	SMALL, PHILLIP		MAN	E						
STREET ADDRESS	5825 WEST HALLANDALE BEACH BLVD.			EET ADDRESS						
CITY-SI-ZIP	WEST PARK, FL 33023		CITY	-ST-ZIP						
TITLE	V	☐ Delete	TiTL	E				Change	Addition	
NAME	HOUSEN, EVERTON		NAM	€ j						
STREET ADDRESS	5825 WEST HALLANDALE BEA	ACH BLVD.		EET ADORESS						
CITY-ST-ZP	WEST PARK, FL 33023	<u> </u>	CITY	-ST-ZIP						
TITLE	ST	☐ Delete	TITE	E				Change	Addition	
NAM€	TINGLE, KRYSTAL			KE .						
STREET ADDRESS				EET ADDRESS						
CITY-ST-ZIP	WEST PARK, FL 33023		CITY	-ST-ZIP						
THE	D	☐ Delete	TITL	l l				Change	Addition	
NAME	ROBERTSON, ANGELA			4E						
STREET ADDRESS	5825 WEST HALLANDALE BEA	ACH BLVD.		EET ADDRESS						
CITY-ST-ZIP	WEST PARK, FL 33023		an	(-S1-ZIP						
TITLE		☐ Delete	TITE	£				Change	Addition	
NAME			NAX	AE						
STREET ADDRESS	1			EET AODRESS						
CITY-ST-ZIP	1		CIT	r-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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 Date OF PRINTED OR PRINT