2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Aug 23, 2007 8:00 am Secretary of State

DOCUMENT # P06000078095 1. Entity Name J.L. PROOFING, INC.						08-23-2007 9	_		00
Principal Place of Business Mailing Address 5615 MARION AVENUE 5615 MARION AVENUE ORLANDO, FL 32839 ORLANDO, FL 32839				.	! (i) Ca ii) i tar i (c ii)	COMO (OFO) CO	N FS) (1 (FS)
Principal Place of Business - No P.O. Box #									
Suite, Apt. #, etc.		Suite, Apt. #, etc.		06302007	Chg-P	CR2E034	1 (12/06)		
City & State		City & State		4. FEI Numb	16419	<u></u>	-	oplied For ot Applicable	
Zip Country		Zip	Country		5. Certificate	of Status Desired		8.75 Add	
	6. Name and Address of Current	t Registered Agent	1	<u> </u>	7. Name and	Address of New R	legistered Ag	ent	
				Name					
MILLER, PATRICIA 5615 MARION AVENUE ORLANDO, FL 32839				Street Address (P.O. Box Number is Not Acceptable)					
ORLANDO	J, FL 32639								
				City			FL	Zip Code	e
	named entity submits this statement flions of registered agent.	or the purpose of changing its	s registere	ed office or regist	tered agent, or bo	th, in the State of Flo	orida. I am far	miliar with,	and accept
SIGNATURE.									
	Signature, typed or printed name of registered agen	t and title if applicable. (NO)	TE: Registered	d Agent signature requi	ired when reinstating)		DATE		
	Signature, typed or printed name of registered agent LE NOW!!! FEE IS \$150.00 ue by September 14, 2007	9. Election Campa Trust Fund Con	aign Fìnan	ncing \$	5.00 May Be	In accordance v	with s. 607.1	93(2)(b), the prior r	F.S., the notice.
	LE NOW!!! FEE IS \$150.00	9. Election Campa Trust Fund Con	aign Fìnan	ncing \$	5.00 May Be dded to Fees	In accordance v corporation did	with s. 607.1 not receive t	the prior r	notice.
Đ	LE NOW!!! FEE IS \$150.00 ue by September 14, 2007	9. Election Campa Trust Fund Con	aign Finantribution. 11. TITLE NAME STRE	noting \$	5.00 May Be dded to Fees	corporation did	with s. 607.1 not receive t	the prior r	notice.
10. TITLE NAME STREET ADDRESS	LE NOW!!! FEE IS \$150.00 ue by September 14, 2007 OFFICERS AND PD LECKLITER, JOSEPH 5615 MARION AVENUE	9. Election Campa Trust Fund Con D DIRECTORS	aign Finantiribution. 11. TITLE NAMI STRE CITY TITLE NAMI STRE	E E E E E E E E E E E E E E E E E E E	5.00 May Be dded to Fees	corporation did	with s. 607.1 not receive t ICERS AND D	IRECTORS	notice.
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12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 139, Plottad statutes. I formation 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 exegute 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 type empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-1907

407-865-1019

Daytime Phone #