


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 8:00 am
Secretary of State

02-19-2007 90059 050 ***150.00

DOCUMENT # P06000105530	
1. Entity Name JEDI KNIGHT IMPROVEMENTS, INC.	

Principal Place of Business 3651 NW 6TH PLACE FORT LAUDERDALE, FL 33311	Mailing Address 3651 NW 6TH PLACE FORT LAUDERDALE, FL 33311
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40020420



2. Principal Place of Business - No P.O. Box # 2371 NW 132nd St	3. Mailing Address P.O. Box 120574
Suite, Apt. #, etc. n/a	Suite, Apt. #, etc. n/a

01232007 Chg-P CR2E034 (12/06)

City & State Miami, FL	City & State Fort Lauderdale, FL
Zip 33167	Zip 33312
Country USA	Country USA

4. FEI Number 20-5366147	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent JOHNSON, RICHARD 3651 NW 6TH PLACE FORT LAUDERDALE, FL 33311	
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7. Name and Address of New Registered Agent Name Johnson, Richard Street Address (P.O. Box Number is Not Acceptable) 2371 NW 132nd St. City Miami FL 33167	
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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 Richard L. Johnson DATE 1/24/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE Johnson, Richard	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME JOHNSON, RICHARD		NAME 2371 NW 132nd St.	
STREET ADDRESS 3651 NW 6TH PLACE		STREET ADDRESS Miami, FL 33167	
CITY-ST-ZIP FORT LAUDERDALE, FL 33311		CITY-ST-ZIP MIAMI, FL 33167	
TITLE 	<input type="checkbox"/> Delete	TITLE ASecretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME 		NAME Agor, BAW-ey	
STREET ADDRESS 		STREET ADDRESS 11505 SW 19th St	
CITY-ST-ZIP 		CITY-ST-ZIP FT. LAUDERDALE, FL 33325	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 	
TITLE 	<input type="checkbox"/> Delete	TITLE 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 	

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: Richard L. Johnson	Date 1/24/07
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	