

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149269

Entity Name: JUNO & JOVE, INC.

FILED  
Apr 29, 2007  
Secretary of State

## Current Principal Place of Business:

1343 MAIN STREET  
SUITE 602  
SARASOTA, FL 34230 US

## Current Mailing Address:

1343 MAIN STREET  
SUITE 602  
SARASOTA, FL 34230 US

FEI Number: 20-8075878

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BONO, RANDALL A  
1343 MAIN STREET  
SUITE 602  
SARASOTA, FL 34230 US

## New Principal Place of Business:

1343 MAIN STREET  
SUITE 602  
SARASOTA, FL 34236 US

## New Mailing Address:

1343 MAIN STREET  
SUITE 602  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

RABLLC  
1343 MAIN STREET  
SUITE 602  
SARASOTA, FL 34236 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: RANDALL BONO

04/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BONO, OLIVIA N  
Address: 9007 PINE AVE  
City-St-Zip: SAINT LOUIS, MO 63144

Title: VP ( ) Delete  
Name: BONO, STACIE E  
Address: 250 MERCER STREET APT C-604  
City-St-Zip: NEW YORK, NY 10012

Title: S ( ) Delete  
Name: GASSEN, MATTHEW W  
Address: 2333 HICKORY STREET APT C  
City-St-Zip: SAINT LOUIS, MO 63104

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: GASSEN, MATTHEW W  
Address: 6022 MADRDAO  
City-St-Zip: SARASOTA, FL 34232

Title: T ( ) Change (X) Addition  
Name: BONO, RANDALL A  
Address: 1343 MAIN STREET, #602  
City-St-Zip: SARASOTA, FL 34236

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: OLIVIA BONO

P

04/29/2007

Electronic Signature of Signing Officer or Director

Date