2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000030341

City-St-Zip:

Entity Name: J.CROSS & LYN ENTERPRISES, INC

FILED Mar 12, 2009 Secretary of State

y	 0.011001	J W ETTV ETV TENT THOSE	_O, II (O.					
Current P	rincipal Place	e of Business:		New Principal Place of Business:				
	34TH AVE UN DALE LAKES, F							
Current M	lailing Addres	ss:		New Mailing Address:				
	34TH AVE UN DALE LAKES, F							
FEI Number: 20-8679885 FEI Number Applied For ()			or () FEI Num	FEI Number Not Applicable () Certificate of Status Desired ()				
Name and	Address of C	Current Registered A	gent:	Name and	Address of N	New Regist	tered Agent:	
2775 NW 3	ENNIFER E 34TH AVE #10 DALE LAKES, F							
	named entity e of Florida.	submits this statemen	t for the purpose of	changing it	s registered o	office or reg	istered agent, or both,	
SIGNATUR	RE:							
	Electron	nic Signature of Regist	tered Agent			Da	ate	
Election Car	mpaign Financin	g Trust Fund Contribution	n ().					
OFFICER	S AND DIREC		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip: Title: Name: Address:	CROSS, JENN PO BOX 66894 POMPANO BE	12 ACH, FL 33066) Delete A J		Title: Name: Address: City-St-Zip: Title: Name: Address:	LYN, MARK PO BOX 66894 POMPANO BE	ACH, FL 3306) Change() R	36	
City-St-Zip:	POMPANO BE	ACH, FL 33066		City-St-Zip:	POMPANO BE	ACH, FL 3306	36	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	T (CROSS, AIRIK PO BOX 66894 POMPANO BEA	12		
Title: Name: Address:	() Delete		Title: Name: Address:	S (CROSS, MARJ PO BOX 66894		Addition	

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.

City-St-Zip:

SIGNATURE: JENNIFER LYN VP 03/12/2009

POMPANO BEACH, FL 33066