## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000104897

Entity Name: JVKA, INC.

FILED Mar 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10090 INTERCOM DR. 23355 CAROLYNE LN

UNIT B 13 FORT MYERS, FL 33913 US FORT MYERS, FL 33913

Current Mailing Address: New Mailing Address:

10090 INTERCOM DR. 106 NE 6TH AVE

UNIT B 13 CAPE CORAL, FL 33909 US FORT MYERS, FL 33913

FEI Number: 94-3455465 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VENETIS, JOANNE P

% VENETIS ENTERPRISES

10090 INTERCOM DR. UNIT B13

FORT MYERS, FL 33913 US

ALCALA, KEYSY

23355 CAROLYNE LN

FORT MYERS, FL 33913 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: KEYSY ALCALA 03/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: PSD (X) Change ( ) Addition Name: VENETIS, JOANNE P Name: ALCALA, KEYSY

 Name:
 VENETIS, JOANNE P
 Name:
 ALCALA, KEYSY

 Address:
 9421 CHARTWELL BREEZE DR
 Address:
 23355 CAROLYNE LN

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:
 FORT MYERS, FL 33913 US

 Name:
 ALCALA, KEYSY
 Name:
 ALCALA, KEYSY

 Address:
 28090 DOVEWOOD CT. APT. 207
 Address:
 23355 CAROLYNE LN

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:
 FORT MYERS, FL 33913 US

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: KEYSY ALCALA PSD 03/30/2009