

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000066368

Entity Name: J.A.J.A. LIFESTYLES INC

FILED
Mar 15, 2011
Secretary of State

Current Principal Place of Business:

6835 19TH AVE S
LANTANA, FL 33462

New Principal Place of Business:

6835 19TH AVE S
LANTANA, FL 33462 US

Current Mailing Address:

6835 19TH AVE S
LANTANA, FL 33462

New Mailing Address:

6835 19TH AVE S
LANTANA, FL 33462 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAUSS, ADRIANA
6835 19TH AVE S
LANTANA, FL 33426 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STRAUSS, ADRIANA
Address: 6835 19TH AVE S
City-St-Zip: LANTANA, FL 33462 US

Title: P
Name: ADRIANA, STRAUSS
Address: 6835 19TH AVE SOUTH
City-St-Zip: LANTANA, FL 33462 US

Title: P
Name: ADRIANA STRAUSS, STRAUSS
Address: 6835 19TH AVE SOUTH
City-St-Zip: LANTANA, FL 33462 US

Title: P
Name: ADRIANA, STRAUSS
Address: 6835 19TH AVE SOUTH
City-St-Zip: LANTANA, FL 33462 US

Title: P
Name: ADRIANA, STRAUSS
Address: 6835 19TH AVE SOUTH
City-St-Zip: LANTANA, FL 33462 US

Title: P
Name: ADRIANA, STRAUSS
Address: 6835 19TH AVE SOUTH
City-St-Zip: LANTANA, FL 33462 US

I hereby 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 all other like empowered.

SIGNATURE: ADRIANA STRAUSS

P

03/15/2011

Electronic Signature of Signing Officer or Director

Date