2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 16, 2008 08:00 All Secretary of State **DOCUMENT # P92000011255** 1. Entity Name JAT HOLDINGS, INC. Principal Place of Business Mailing Address 3200 TAMIAMI TRAIL N 3200 TAMIAMI TRAIL N SUITE 200 SUITE 200 NAPLES, FL 34103 NAPLES, FL 34103 CR2E034 (11/05) 01152008 No Chg-P Applied For 4. FEI Number 65-0378394 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent WOODWARD, MARK J DO NOT WRITE WOODWARD, PIRES & LOMBARDO, P.A. 3200 TAMIAMI TRAIL N, STE 200 IN THIS SPACE NAPLES, FL 34103 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 the obligations of registered agent. Signature, typed or printed name of registered agen) and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 04/28/08-80044-014 150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE WOODWARD, MARK J NAME STREET ADDRESS 3200 TAMIAMI TRAIL N, STE 200 CITY-ST-ZIP NAPLES, FL 34103 TITLE NAME PIRES, JR. A P STREET ADDRESS 3200 TAMIAMI TRAIL N, STE 200 NAPLES, FL 34103 CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-\$T-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark J. Woodward, as Director

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(239) 649-6555

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Daytime Phone #

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