## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 14, 2005 08:00 AM Secretary of State **DOCUMENT # P93000027861** J & L ENTERPRISES OF ORLANDO, INC. Principal Place of Business Mailing Address 9550 SATELLITE BLVD. 9550 SATELLITE BLVD SUITE 100 SUITE 100 ORLANDO, FL 32837 ORLANDO, FL 32837 04112005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 59-3174528 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GARTEN, JOHN D 9550 SATELLITE BLVD SUITE 100 IN THIS SPACE ORLANDO, FL 32837 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 with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required whan reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D TITLE GARTEN, JOHN D NAME 1631 WIND WILLOW ROAD STREET ADDRESS 11000001306044 ORLANDO, FL 32809 CITY-ST-ZIP 04/14/05-80111-004 158.75 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7/P IN THIS SPACE TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachpent with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7(P TITLE NAME STREET ADDRESS CITY - ST - ZIP

FILED