


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000050693	
1. Entity Name JASON-LARRY ENTERPRISES, INC.	

Principal Place of Business 763 ALT A1A JUPITER, FL 33477	Mailing Address 763 ALT A1A JUPITER, FL 33477
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05052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0423896	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent VIENS, DEBORAH 763 ALT A1A JUPITER, FL 33477
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BUCKLES, JASON 763 ALT A1A JUPITER, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP VIENS, LARRY P 763 ALT A1A JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BUCKLES, BARBARA 763 ALT A1A JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S VIENS, DEBORAH 763 ALT A1A JUPITER, FL 33477
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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 attachment with an address, with all other like empowered.

SIGNATURE: <i>Barbara Buckles</i> - BARBARA BUCKLES	5/5/04 (56) 747-4665
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>