


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000082199 1. Entity Name JEPAL, INC.	
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Principal Place of Business 9053 STARKEY ROAD SEMINOLE, FL 33777 US	Mailing Address 9053 STARKEY ROAD SEMINOLE, FL 33777 US
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DO NOT WRITE IN THIS SPACE

01262005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3211576	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

THOMPSON, PAUL
9053 STARKEY ROAD
SEMINOLE, FL 33777

**DO NOT WRITE
IN THIS SPACE**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	THOMPSON, PAUL
STREET ADDRESS	1331 TRIMARAN PLACE, HERITAGE PLACE
CITY-STATE-ZIP	NEW PORT RICHEY, FL 34655

TITLE	VS
NAME	THOMPSON, JEAN
STREET ADDRESS	1331 TRIMARAN PLACE, HERITAGE PLACE
CITY-STATE-ZIP	NEW PORT RICHEY, FL 34655

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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02/01/05-80054-002 150.00

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: X Thompson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President
Date

1/28/05
Daytime Phone #