## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 18, 2007 8:00 am Secretary of State

DOCUMENT # P95000013116  1. Entity Name J.G. JOHNSON CORP.				04-18-2007 90160 022 ***150.00					
Principal Place	e of Business	Mailing Address	•						
407 COMMERCE WAY #15A PO BOX 8651 JUPITER, FL 33458 US JUPITER, FL 33468									
JUPITER, FL 33458 US JUPITER, FL 33468						(B) 81 8231 8834 8831 WE			18 M IN 1838
Principal Place of Business - No P.O. Box #     3. Mailing Address									
319 5Th STREET						REFEE STORE STEEL COLUMN	) <b>Baiai</b> ir <b>bea</b> iriaf iii	IDI 920 IU 1011.	MIKI 13 IDDI
Suite, Apt.	uite, Apt. #, etc. Suite, Apt. #, etc.				04112007	Chg-P	CR2E034 (	12/06)	
City & State JUP A TER FL City & State				4. FEI Numbe 65-056			<del></del>	plied For t Applicable	
Zip Country Zip Country 3345-8 USA Zip Coun			5. Certificate of Status Desired						
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
JOHNSON, JAN				Street Address (P.O. Box Number is Not Acceptable)					
319 6TH ST JUPITER, FL 33458				diselation (1.0, box named is not acceptable)					
			City Zip Code						
R. The above named entity submits this statement for the number of changing its registers				'   <b>FL</b>					
<ol> <li>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.</li> </ol>									
SIGNATURE									
Signature, typed or printed name of registered agent and title if epplicable (NOTE Registered Agent signature required when reinstoling) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.					.00 May Be ed to Fees				
10.	OFFICERS AND I		11.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/	CHANGES TO OFF	ICERS AND DIF	ECTORS	
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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 10 if									
changed, or on an attachment with an address, with all other like empowered.									