2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000034926

Entity Name: JIMMY'Z IRRIGATION & PRESSURE WASHING, INC.

FILED Feb 03, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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360 SUNCOAST BLVD.

SPRING HILL, FL 34608 US

3401 DELTONA BOULEVARD
SPRING HILL, FL 34606 US

Current Mailing Address: New Mailing Address:

360 SUNCOAST BLVD.

SPRING HILL, FL 34608 US

3401 DELTONA BOULEVARD
SPRING HILL, FL 34606 US

FEI Number: 59-3318739 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JABLON, JAMES SOMERS, STEVEN
360 SUNCOAST BLVD. 3401 DELTONA BLVD
SPRING HILL, FL 34608 US SPRING HILL, FL 34606 US

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.

SIGNATURE: STEVEN SOMERS 02/03/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: JABLON, JAMES Name: SOMERS, STEVEN

 Address:
 360 SUNCOAST BLVD
 Address:
 3401 DELTONA BLVD

 City-St-Zip:
 SPRING HILL, FL 34608
 City-St-Zip:
 SPRING HILL, FL 34606

Title: T () Delete Title: T (X) Change () Addition Name: JABLON, TERRI Name: SOMERS, STEVEN

Address: 360 SUNCOAST BLVD Address: 3401 DELTONA BLVD City-St-Zip: SPRING HILL, FL 34608 City-St-Zip: SPRING HILL, FL 34606

Title: S () Delete Title: S (X) Change () Addition

 Name:
 JABLON, JAMES
 Name:
 SOMERS, STEVEN

 Address:
 360 SUNCOAST BLVD
 Address:
 3401 DELTONA BLVD

 City-St-Zip:
 SPRING HILL, FL 34608
 City-St-Zip:
 SPRING HILL, FL 34606

Title: VP () Delete Title: () Change () Addition

 Name:
 SOMERS, STEVEN
 Name:

 Address:
 3401 DELTONA BLVD
 Address:

 City-St-Zip:
 SPRING HILL, FL 34606
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN SOMERS P 02/03/2006