
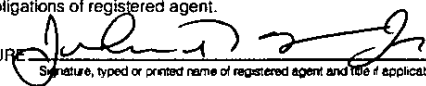
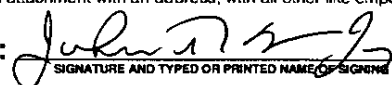


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P95000084330</b> 1. Entity Name <b>DEBJO, INC.</b>																																			
Principal Place of Business <b>1312 COMMERCE LN 15-B JUPITER, FL 33458 US</b>		Mailing Address <b>1312 COMMERCE LN 15-B JUPITER, FL 33458 US</b>																																	
2. Principal Place of Business <b>5892 Williamson Rd.</b> Suite, Apt. #, etc.		3. Mailing Address <b>6671 Indianturn Rd</b> Suite, Apt. #, etc. <b>56-311</b>																																	
City & State <b>Jupiter, FL</b> Zip <b>33458</b>		City & State <b>Jupiter, FL</b> Zip <b>33458</b>																																	
Country <b>USA</b>		Country <b>USA</b>																																	
4. FEI Number <b>65-0669351</b>		Applied For <input type="checkbox"/> Not Applicable																																	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>																																	
6. Name and Address of Current Registered Agent  <b>MORGAN, JOHN JR 1312 COMMERCE LANE #15B JUPITER, FL 33458</b>		7. Name and Address of New Registered Agent Name <b>Morgan, John Jr.</b> Street Address (P.O. Box Number is Not Acceptable) <b>5892 Williamson Rd.</b> City <b>Jupiter</b> <b>FL</b> Zip Code <b>33458</b>																																	
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  DATE <b>9/6/05</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>																																			
<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">           TITLE  <b>P</b>            NAME  <b>MORGAN JR, JOHN T</b>            STREET ADDRESS  <b>1312 COMMERCE LANE #15B</b>            CITY-ST-ZIP  <b>JUPITER, FL 33458</b> </td> <td style="width:50%; text-align: right;"> <input type="checkbox"/> Delete         </td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>		TITLE <b>P</b> NAME <b>MORGAN JR, JOHN T</b> STREET ADDRESS <b>1312 COMMERCE LANE #15B</b> CITY-ST-ZIP <b>JUPITER, FL 33458</b>	<input type="checkbox"/> Delete															11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">           TITLE  <b>P</b>            NAME  <b>Morgan, John T.</b>            STREET ADDRESS  <b>5892 Williamson Road</b>            CITY-ST-ZIP  <b>Jupiter, FL 33458</b> </td> <td style="width:50%; text-align: right;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>		TITLE <b>P</b> NAME <b>Morgan, John T.</b> STREET ADDRESS <b>5892 Williamson Road</b> CITY-ST-ZIP <b>Jupiter, FL 33458</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition														
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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:  DATE <b>9/6/05</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																			

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SECRET  
TALLAHASSEE, FLORIDA



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