

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000089177

Entity Name: JDS CORPORATION

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

11320 LAKELAND CIRCLE  
FORT MYERS, FL 33913 US

## New Principal Place of Business:

12380 JEWEL STONE LANE  
FORT MYERS, FL 33913 US

## Current Mailing Address:

11320 LAKELAND CIRCLE  
FT MYERS, FL 33913 US

## New Mailing Address:

12380 JEWEL STONE LANE  
FORT MYERS, FL 33913 US

FEI Number: 65-0627153

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANCHEZ, JOAQUIN  
11320 LAKELAND CIRCLE  
FT MYERS, FL 33913 US

## Name and Address of New Registered Agent:

SANCHEZ, JOAQUIN  
12380 JEWEL STONE LANE  
FT MYERS, FL 33913 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SANCHEZ, JOAQUIN  
Address: 11320 LAKELAND CIRCLE  
City-St-Zip: FT MYERS, FL 33913

Title: O ( ) Delete  
Name: SANCHEZ, ISMARYS  
Address: 11320 LAKELAND CIRCLE  
City-St-Zip: FT MYERS, FL 33913

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SANCHEZ, JOAQUIN  
Address: 12380 JEWEL STONE LANE  
City-St-Zip: FT MYERS, FL 33913

Title: O (X) Change ( ) Addition  
Name: SANCHEZ, ISMARYS  
Address: 12380 JEWEL STONE LANE  
City-St-Zip: FT MYERS, FL 33913

I hereby certify that the information supplied with this filing does not qualify 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: ISMARYS SANCHEZ

O

04/30/2009

Electronic Signature of Signing Officer or Director

Date