

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000011476

FILED
Feb 10, 2006
Secretary of State

Entity Name: JASMIN ENTERPRISES OF PINELLAS, INC.

Current Principal Place of Business:

KRESS BUILDING, SUITE 202
475 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

C/O ERNEST L. MASCARA, PA
475 CENTRAL AVENUE, SUITE 202
ST. PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: 59-3359885 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASCARA, ERNEST L
KRESS BUILDING, SUITE 202
475 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: KROEGER, PETER
Address: 10409 LANSFIELD STREET
City-St-Zip: SPRING HILL, FL 34609 US

Title: DVS () Delete
Name: KROEGER, ANGELIKA
Address: 10409 LANSFIELD STREET
City-St-Zip: SPRING HILL, FL 34609 US

Title: VP () Delete
Name: MASCARA, ERNEST L
Address: 475 CENTRAL AVENUE, SUITE 202
City-St-Zip: ST PETERSBURG, FL 33701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: PETER KROEGER

DPT

02/10/2006

Electronic Signature of Signing Officer or Director

Date