

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 17, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P96000026019**  
 1. Entity Name  
**JAG INDUSTRIES, INC.**



Principal Place of Business  
**15820 99TH CT N  
 PALM BEACH GARDENS, FL 33412**

Mailing Address  
**PO BOX 212754  
 ROYAL PALM BEACH, FL 33421**

**DO NOT WRITE IN THIS SPACE**



04112007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0663690</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**COSTNER, JAMES  
 15820 99TH CT NORTH  
 PALM BEACH GARDENS, FL 33412**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

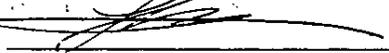
9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE <b>PC</b>	<b>COSTNER, GABRIELLE</b> 15820 99TH CT NORTH PALM BEACH GARDENS, FL 33412
TITLE <b>VTS</b>	<b>COSTNER, JAMES</b> 15820 99TH CT NORTH PALM BEACH GARDENS, FL 33412
TITLE <b>NAME</b>	
TITLE <b>NAME</b>	
TITLE <b>NAME</b>	
TITLE <b>NAME</b>	

000000713012  
 04/26/07-80073-002 163.75

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 11 if changed, or on an attachment with an address with all other like empowered.

**SIGNATURE:**  **James Costner** 4/11/07 (561) 876-6983

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #