

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2005 08:00 AM Secretary of State

DOCUMENT # P96000083984 1. Entity Name JA/MATADI ENTERPRISES, INC.



Principal Place of Business 20339 US HWY 27 CLERMONT, FL 34711 US Mailing Address 4800 APOPKA VINELAND RD. ORLANDO, FL 32819



DO NOT WRITE IN THIS SPACE

04262005 No Chg-P CR2E034 (10/03) 4. FEI Number 59-3416865 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PHILLIPS, R. PATRICK ESQ. 200 NORTH THORNTON AVE. ORLANDO, FL 32801

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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 Signature (typed or printed name of registered agent and Title if applicable) DATE

9. Election Campaign Financing Trial Fund Contribution \$5.00 May be Added to Fees

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Row 1: JAIN, MANOHAR H, 4800 APOPKA VINELAND RD., ORLANDO, FL 32819.

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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)(f), 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: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Mo/Year