


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90019 034 ***150.00

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1. Entity Name
JESFER RENOVATIONS, CORP.



Principal Place of Business
~~3640 E 4 AVE~~
~~202~~
~~HIALEAH, FL 33013~~

Mailing Address
~~312A SW 12 AVE~~
~~MIAMI, FL 33130~~

40023342



2. Principal Place of Business - No P.O. Box #
3050 N. PALM AIRE DR.

3. Mailing Address
 Suite, Apt. #, etc.
504

01272008 Chg-P CR2E034 (12/06)

City & State
POMPANO BEACH

City & State

4. FEI Number
65-0743892

Applied For
 Not Applicable

Zip
33069

Country
BROWARD


Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
FERNANDEZ, JESUS M
~~3640 E 4 AVE~~
~~202~~
~~HIALEAH, FL 33013~~

7. Name and Address of New Registered Agent
 Name **FERNANDEZ, JESUS M.**
 Street Address (P.O. Box Number is Not Acceptable)
3050 N. PALM AIRE DR.
#504
 City **POMPANO BEACH** FL Zip Code **33069**

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: **01/27/08**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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


10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
PTSD	FERNANDEZ, JESUS M	3640 E 4 AVE #202	HIALEAH, FL 33013	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
PTSD	FERNANDEZ, JESUS M.	3050 N. PALM AIRE DR.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	#504	POMPANO BEACH	FL, 33069	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:  **JESUS FERNANDEZ** DATE: **01/27/08**

Signature and typed or printed name of signing officer or director Date Daytime Phone #