2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000099565

1. Entity Name JERSAMJO, INC.



FILED Apr 14, 2004 08:00 AM Secretary of State

Principal Place of Business

1735 W HIBISCUS BLVD

MELBOURNE, FL 32901

SUITE 300

Mailing Address

1735 W HIBISCUS BLVD SUITE 300

MELBOURNE, FL 32901



01132004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3415851 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JERRY H. TRACHTMAN, P.A. 1735 W HIBISCUS BLVD SUITE 300 MELBOURNE, FL 32901

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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 it applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U00000112936

OFFICERS AND DIRECTORS 10. DP TITLE NAME TRACHTMAN, JERRY H STREET ADDRESS 1735 W HIBISCUS BLVD SUITE 300 MELBOURNE, FL 32901 CITY-ST-7IP DVS TITLE HENDERSON, SAMUELS NAME STREET ADDRESS 1735 W HIBISCUS BLVD SUITE 300 CITY-ST-ZIP MELBOURNE, FL 32901 DT TITLE NAME FUTCHKO, JOHN J STREET ADDRESS. 1735 W HIBISCUS BLVD SUITE 300 CITY-ST-7IP MELBOURNE, FL 32901 TITLE NAME STREET ADDRESS CITY-ST-71P πιε NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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CITY-ST-ZIP 12. I hereby certify that the information hupplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attachme address, with all other like empowered.

SIGNATURE:

STREET ADDRESS